

## Library Media Specialist of the Year Survey

1. Name of nominator:\*
2. Name of nominator's place of employment:\*
3. Nominator's phone number(s):\*
4. Nominator's email address:\*
5. Name of nominee:
6. Nominee is employed by:\*
7. Campus name:\*
8. Number of years experience as a professional educator:\*
9. Number of years of experience as a librarian:\*
10. Summary of accomplishments (100 words about accomplishments in educational technology in recent years to be used in introduction at Awards Reception and in TCEA publications):\*
11. What technology is available in your library? \*
12. Please provide evidence that you demonstrate the usefulness of technology to library patrons.\*
13. Please provide evidence of programs that you provide to meet the needs of students on your campus. \*
14. Please provide a link to your campus library web page. \*
15. Please provide evidence of your daily use of technology.\*
16. Please provide evidence of technology professional development that you have designed and/or presented for the teachers and administrators on your campus. Include a description of the research model(s) for problem solving and information literacy promoted through the professional development and describe the activities, technology use or programs used that support the research models.\*
17. Please provide evidence of programs that you provide to meet the needs of teachers on your campus. \*
18. Please provide evidence of programs that you provide to meet the needs of administrators on your campus. \*
19. Please provide evidence of programs that you provide to meet the needs of parents and community. \*
20. In the box below please enter your campus principal's name and contact information. \*
21. In the box below please provide the names and contact information for two additional professional references. \*