



# Innovative Leader Award Nomination

SOUTH DAKOTA ASSOCIATION OF ELEMENTARY SCHOOL PRINCIPALS

Name of Nominee:

Nominee's School:

Grade Configuration:

School Address:

Telephone:

Fax:

E-mail

Nominator's name/address/phone:

*Please complete the following questions. Do not use the name of the nominee when filling out this form.*

1. Describe the successful innovative programs established as part of the school program by the nominee.

2. Describe the effect of the nominee's innovative programs on students, staff, and community.

3. Describe how the nominee demonstrates the ability to be a change agent.



