

Ellison Education Grant Principal/Administrator Recommendation Form

Dear Principal or Administrator;

A teacher or a team of teachers (with a project leader) in your school is applying for an Ellison Education Grant. As their supervisor we respectfully request your input. The Ellison Education Grants were created to empower and support Washington State's most effective, innovative and inspirational public K-12 school teachers. Your teacher or team is applying for either an Academic Enrichment or a Professional Learning grant of \$5,000. If the applicant is chosen as a finalist we will conduct an on-site interview with the teacher and or team of teachers at your school. I look forward to meeting you during our visit. If you'd like to know more about the Ellison Education Grants, please visit www.ellison-foundation.org.

Please complete the following recommendation form for the individual teacher or project leader of the applicant team and send it via mail, email or fax to:

Bob Hurlbut
Ellison Foundation
400 112th Ave NE, Suite 230
Bellevue, WA 98004
Email: bhurlbut@ellison-foundation.org
Fax: 1-425-999-4842

Thank you for your time, your input is invaluable to our decision making process.

Bob Hurlbut
Ellison Foundation

Principal/Administrators Recommendation Form
(In the case of teams only one recommendation is required)

Your Name (please print):

Position:

Individual Teacher Applicant or Team Project Leader:

School Name:

Address:

City: Zip:

Primary Phone Number:

Your email:

Number of Years in current position:

Number of Years at current school:

Will you return to your current school next year: Yes__ No__

Using a 1 to 6 scale (1 low - 6 high) how would you rate the applicant on the following? Please circle the appropriate number:

1. Applicant is respected by peers, students and parents in terms of judgment, ability and curriculum development.

1 2 3 4 5 6

2. Applicant is open to new ideas and constructive criticism from peers and administrators.

1 2 3 4 5 6

3. Applicant has the ability to confidently delegate tasks and responsibilities to peers and students.

1 2 3 4 5 6

4. Applicant has the ability to clearly evaluate the effectiveness of team members' involvement and peer performance.

1 2 3 4 5 6

5. Applicant has the ability to assess objectively the effectiveness of a project or approach and readjust if necessary.

1 2 3 4 5 6

6. Applicant (or team) is perceptive to student needs and responds to them in effective and appropriate ways.

1 2 3 4 5 6

7. Applicant demonstrates a consistent set of values and ethical decision making.

1 2 3 4 5 6

8. Applicant has the ability to meet deadlines and complete all projects and requests on time.

1. 2 3 4 5 6

9. Applicant has demonstrated the ability to think strategically and imaginatively.

1 2 3 4 5 6

A. In your own words, what concerns might you have regarding an applicant's ability to design and implement a successful initiative? My only concern would be

B. Do you have any concerns about challenges that might arise within your school as a result of the applicant having resources that others in your school will not?

C. Is there anything in your school policy that prevents the applicant from gaining access to grant funds through your schools bank account?

Signature: _____

Date: _____