

Washington Association of Educational Office Professionals
Awards Program

The following awards are available through WAEOP:

AFFILIATE OF THE YEAR
EDUCATIONAL ADMINISTRATOR OF THE YEAR
EDUCATIONAL OFFICE PROFESSIONAL OF THE YEAR
AWARDS FOR EXCELLENCE IN COMMUNICATION

(District, Internal; District External; Building and Affiliate)

Awards Packets are available from all WAEOP Board Members, or by contacting Rhonda Quinton, CEOE, WAEOP Awards Chairman, at PO Box 829, Connell, WA 99326. You may also contact Ronnie at 509-234-2021 or rquinton@nfsd.org.

All Nomination Forms Must Be Postmarked By February 1

Please mail all Nomination Forms to:

Rhonda Quinton, CEOE
WAEOP Awards Chairman
PO Box 829
Connell, WA 99326

WAEOP AWARD GUIDELINES

1. All WAEOP members are eligible to nominate. They may nominate as an affiliate or individual member. They are eligible to nominate any candidate that meets the guidelines. It is not required that they work for the same school district, college, educational service district, etc. The publication award categories are “self nominating” entries.
2. The original and five (5) copies of the application must be submitted. **Do not** send scrapbooks, newspaper clippings or any other materials. The nominator must submit all documentation at one time and no materials will be returned.
3. WAEOP’s winners in the categories of Educational Administrator of the Year and Educational Office Professional of the Year will be forwarded to NAEOP by the state association.
4. Applications **must be postmarked by February 1**. Completed packets should be mailed directly to the WAEOP Awards chairman.
5. All candidates and the sponsoring WAEOP members and/or affiliates will be notified immediately after the judge’s decisions are final.
6. An inscribed plaque will be presented to the winners at the WAEOP Spring Conference. Certificates will be mailed to all nominees.
7. Applications that do not follow the guidelines will be disqualified (i.e., insufficient number of copies, incorrect number of letters and extraneous materials).
8. No fee is required for any of the award categories.
9. Each committee is made up of a panel of judges consisting of WAEOP members. The individual judges represent different districts, schools and/or educational service districts.

Washington Association of Educational Office Professionals

WAEOP EDUCATIONAL OFFICE PROFESSIONAL OF THE YEAR

- A. Candidate must be a current WAEOP and NAEOP member and must have held membership for a minimum of three (3) consecutive years immediately prior to nomination.
- B. Candidate must currently be employed as an educational office professional (i.e., secretary, clerk, bookkeeper, registrar, library aide, etc.)
- C. Candidate must have been employed as an office professional for a minimum of five (5) years in an educational institution, agency, public or private school, college or university.

CRITERIA FOR JUDGING

- 1. Recommendation of sponsoring member and/or affiliate (Form 1)..... 10%
- 2. Education, PSP Certificates, inservice courses completed (Form 2)..... 20%
- 3. Membership/leadership roles in professional associations (Form 2) 30%
- 4. Community activities (areas of impact in addition to education) (Form 2)..... 5%
- 5. Personnel rating (Form 3) 15%
- 6. Letters of recommendation (maximum 3) 20%

IN ALL CASES, THE DECISION OF THE JUDGES IS FINAL

Submit the original and five (5) copies of the application to the WAEOP Awards Chairman.

NOMINATION FORMS MUST BE POSTMARKED BY FEBRUARY 1

All WAEOP members are eligible to nominate and encouraged to participate in the awards program.

**WAEOP EDUCATIONAL OFFICE PROFESSIONAL OF THE YEAR
SYSTEM FOR JUDGING THE OFFICE PROFESSIONAL**

- A. _____ Candidate must be a current WAEOP and NAEOP member and must have held membership for a minimum of three (3) consecutive years immediately prior to nomination.
- B. _____ Candidate must currently be employed as an educational office professional (i.e., secretary, clerk, bookkeeper, registrar, library aide, etc.)
- C. _____ Candidate must have been employed as an office professional for a minimum of five (5) years in an educational institution, agency, public or private school, college or university.

Name of Candidate: _____

Criteria for judging: (Percentage is maximum – when scoring each candidate, use a graded percentage, i.e., 1% to 5% as the case may be.)

- 1. Recommendation of sponsoring member and/or affiliate - 10% (Form 1) _____
- 2. Education, PSP Certificates, inservice courses completed - 20% (Form 2) _____
- 3. Membership/leadership roles in professional associations - 30% (Form 2) _____
- 4. Community activities (areas of impact in addition to education) - 5% (Form 2) _____
- 5. Personnel rating - 15% (Form 3) _____
- 6. Letters of recommendation (maximum 3) - 20% _____
- TOTAL (maximum 100%:** _____

Scored by _____

Dated _____

Washington Association of Educational Office Professionals

Form 1

**WAEOP EDUCATIONAL OFFICE PROFESSIONAL OF THE YEAR
NOMINATION FORM**

(To be completed by sponsoring WAEOP member or affiliate)

Name of Candidate _____

Address _____
Street City State Zip

Home Telephone(_____) _____ Office Telephone(_____) _____

Employer _____ Location _____

Supervisor _____ Title _____

Basis for selection of nominee

Name of sponsoring WAEOP member or affiliate _____

Name of affiliate president (if applicable) _____

Address of sponsor _____
Street City State Zip

Telephone of sponsor (Home) (_____) _____ (Work) (_____) _____

Signature of sponsor _____ Date _____

Submit the original and five (5) copies of Forms 1, 2, 3, and three letters of recommendation to the WAEOP Awards Chairman.

NOMINATION FORMS MUST BE POSTMARKED BY FEBRUARY 1

WAEOP EDUCATIONAL OFFICE PROFESSIONAL OF THE YEAR
(To be completed by nominee)

Name _____ Position _____ No. of Years _____

Address _____

Supervisor _____

Business address of supervisor _____

PREVIOUS POSITIONS HELD (Use additional sheet if needed)

Title of Position	Place of Employment	From	To
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EDUCATION (Include high school)

Name of Course of Degree	Institution	No. Cr./Hrs	Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PROFESSIONAL STANDARDS PROGRAM CERTIFICATE(S) HELD

(Indicate by filling in the year received)

Basic _____ Assoc. Prof. _____ Advanced I _____ Advanced II _____ Advanced III _____

Assoc. Degree _____ Bachelor _____ Master _____ Doctoral _____ CEOE _____

INSERVICE COURSES COMPLETED (Include last 10 years)

List inservice courses on a separate sheet using the following format:

Name of Program/Course	Sponsored by	No. Clock Hrs	Year
_____	_____	_____	_____
_____	_____	_____	_____

WAEOP EDUCATIONAL OFFICE PROFESSIONAL OF THE YEAR

MEMBERSHIP/LEADERSHIP ROLES IN PROFESSIONAL ASSOCIATIONS

	Association	Yrs. Mbr.	Office/Committee	Year(s)
National:	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
State:	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
Local:	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

COMMUNITY ACTIVITIES (Include last 5 years)

	Organization	Community Activity or Office Held	Year(s)
National:	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
State:	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
Local:	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Signature of Nominee _____

Date _____

**WAEOP EDUCATIONAL OFFICE PROFESSIONAL OF THE YEAR
PERSONNEL RATING**

(To be completed by immediate supervisor of nominee)

Please evaluate candidate with a short narrative in each of the following areas. The rating should cover the past five (5) years of employment, especially noting specific job performance. If in present position less than five years, office professionals should submit copies of performance evaluations from previous positions within the past five years.

OFFICE MANAGEMENT:

INTERPERSONAL RELATIONSHIPS:

LEADERSHIP:

PROFESSIONAL GROWTH:

PROFESSIONALISM:

PUBLIC RELATIONS:

KNOWLEDGE AND SKILLS:

Signature of Office Professional

Date

Signature of Immediate Supervisor

NOMINATION FORMS MUST BE POSTMARKED BY FEBRUARY 1

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