# 2024 AAPRA Educator Membership Nomination Form Nominations Open April 9 – May 30, 2024

This form duplicates the information requested on the online Submittable Nomination Form.

Use this form to work with your nominee.

Name of Nominee Name of Nominator (Must be a current AAPRA member) Nominator Mobile Phone Number Nominator Email

Name of Nominee First Last

Preferred Gender Pronoun

He/Him/His She/Her/Hers They/Them/Theirs Prefer not to answer Other / Comment

# **CURRENT EMPLOYER**

**Dates of Employment** 

Years & Months in Current Position

Job Title

Name & Position of Supervisor

**Academic Institution Name** 

Address

Country Address

City

State / Province Zip / Postal Code

Work Phone Mobile Phone

Email

### CHARACTERISTICS OF CURRENT EMPLOYER

Type of Entity – check box College / University

Other

Describe Scope of Responsibility
Chief Accomplishments to Date in Current Position

#### PRIOR EXPERIENCES

List prior experiences that total fifteen (15) years of high-level educational and/or administrative experience as of the year nominated.

If prior experiences are non-academic, please provide scope of operation (recreation, parks, both parks & recreation, other), size of staff, budget, & population served if applicable.

Dates (to – from)
Years/Months in Position
Position Title
College / University
Other
City/State
Name & Position of Immediate Supervisor
Describe Scope of Responsibility
If applicable, describe scope of operation
If applicable, provide annual budget (capital & operating)
If applicable, provide population served

Chief Accomplishments in Position

Do you have additional prior experiences to list? YES NO

If prior experiences are non-academic, please provide scope of operation (recreation, parks, both parks & recreation, other), size of staff, budget, & population served if applicable.

Prior Experience II

Dates (to – from)

Years/Months in Position

Position Title

College / University

Other

City/State

Name & Position of Immediate Supervisor

Describe Scope of Responsibility

If applicable, describe scope of operation

If applicable, describe size of staff

If applicable, provide annual budget (capital & operating)

If applicable, provide population served

Chief Accomplishments in Position

Do you have additional prior experiences to list? YES NO

If prior experiences are non-academic, please provide scope of operation (recreation, parks, both parks & recreation, other), size of staff, budget, & population served if applicable.

**Prior Experiences III** 

Dates (to - from)

Years/Months in Position

**Position Title** 

College / University

Other

City/State

Name & Position of Immediate Supervisor

Describe Scope of Responsibility

If applicable, describe scope of operation

If applicable, describe size of staff

If applicable, provide annual budget (capital & operating)

If applicable, provide population served

Chief Accomplishments in Position

Do you have additional prior experiences to list?

YES

NO

NO

If prior experiences are non-academic, please provide scope of operation (recreation, parks, both parks & recreation, other), size of staff, budget, & population served if applicable.

**Prior Experiences IV** 

Dates (to - from)

Years/Months in Position

**Position Title** 

College / University

Other

City/State

Name & Position of Immediate Supervisor

Describe Scope of Responsibility

If applicable, describe scope of operation

If applicable, describe size of staff

If applicable, provide annual budget (capital & operating)

If applicable, provide population served

Chief Accomplishments in Position

Do you have additional prior experiences to list? YES

If prior experiences are non-academic, please provide scope of operation (recreation, parks, both parks & recreation, other), size of staff, budget, & population served if applicable.

Prior Experiences V

Dates (to – from)

Years/Months in Position

**Position Title** 

College / University

Other

City/State

Name & Position of Immediate Supervisor
Describe Scope of Responsibility
If applicable, describe scope of operation
If applicable, describe size of staff
If applicable, provide annual budget (capital & operating)
If applicable, provide population served
Chief Accomplishments in Position

Do you have additional prior experiences to list? YES NO

If prior experiences are non-academic, please provide scope of operation (recreation, parks, both parks & recreation, other), size of staff, budget, & population served if applicable.

Prior Experiences VI
Dates (to – from)
Years/Months in Position
Position Title
College / University
Other
City/State
Name & Position of Immediate Supervisor
Describe Scope of Responsibility
If applicable, describe scope of operation
If applicable, describe size of staff
If applicable, provide annual budget (capital & operating)
If applicable, provide population served
Chief Accomplishments in Position
Chief Accomplishments in Position

#### **EDUCATION**

List degrees, workshops, schools, professional development (excluding conferences). Degree, Institution, Program Title(s) and Date.

# **CERTIFICATIONS**

List current certifications, certifying organization (do not abbreviate), and year received.

## JEDI

Describe your efforts to identify, address and advance justice, equity, diversity and inclusion efforts in your university, program, and the profession.

## PROFESSIONAL LEADERSHIP & INVOLVEMENT

List professional leadership and involvement experiences including positions held at local, state, regional, national, or international organizations. Provide years of service, positions held and organization name. List most recent experiences first.

## **PUBLICATIONS & MAJOR PRESENTATIONS**

Publications: provide publication name, article title, & date published. Productivity indices, such as Hirsch "H index" and i10 index should be noted.

Presentations: provide name of professional organizational conferences, title of presentation, date, and purpose of presentation.

**HONORS & AWARDS** 

List individual awards first. Provide name of award, who bestowed award, and date received.

NOMINEE'S STATEMENT

**UPLOAD SUPPORT LETTERS** 

Nominator's Support Letter

Support Letter Number 1 (must be from a current Academy member).

Support Letter Number 2 (may be from a current Academy member OR an executive director of a state park and recreation organization OR state president if that state does not have an executive director).