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.

<table>
<thead>
<tr>
<th>Dates (to – from)</th>
<th>Years/Months in Position</th>
<th>Position Title</th>
<th>College / University</th>
<th>Other</th>
<th>City/State</th>
<th>Name &amp; Position of Immediate Supervisor</th>
<th>Describe Scope of Responsibility</th>
<th>If applicable, describe scope of operation</th>
<th>If applicable, describe size of staff</th>
<th>If applicable, provide annual budget (capital &amp; operating)</th>
<th>If applicable, provide population served</th>
<th>Chief Accomplishments in Position</th>
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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
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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

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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 IV

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Prior Experiences V

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<tr>
<th>Name &amp; Position of Immediate Supervisor</th>
<th>Describe Scope of Responsibility</th>
<th>If applicable, describe scope of operation</th>
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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.
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).