TALENT POOL RECOMMENDATION FORM

Incomplete forms will be eliminated from this process.

Please complete a separate form for each individual including a **one-page letter explaining how this person meets the criteria outlined**. Please include a **resume** for each recommendation.

THIS IS A CONFIDENTIAL PROCESS

Individuals should not be aware of this recommendation.

NAME OF RECOMMENDED EDUCATOR		
CLASSROOM TEACHER PRINCIPAL	OTHER (please specify)	
TEACHERS: GRADE(S) CURRENTLY TEACHING	PRINCIPALS: GRADE LEVELS IN BUIL	DING
MATHEMATICS SOCIAL STUDIES SC	CIENCE FINE ARTS READING/ENGLISH/L	ANGUAGE ARTS
FOREIGN LANGUAGE (please specify)	OTHER (please specify)	
TEACHERS: TOTAL YEARS IN EDUCATION	PRINCIPALS: NUMBER OF YEARS AS AN AU	OMINISTRATOR
Will the recommended educator be at t	he same school site next year?	NO
SCHOOL DISTRICT	SCHOOL NAME	
SCHOOL MAILING ADDRESS	CITY	ZIP
EDUCATOR'S SUPERVISOR	SUPERVISOR'S EMAIL ADDRESS	
SCHOOL AREA CODE & PHONE NUMBER		

RATE educator from 1-10 (10 being highest) on the following four criteria and provide a paragraph to
explain your rating. Be detailed and thorough, with examples whenever possible.

 Exceptional educational talent as evidenced by effective instructional practices and student learning results in the classroom and school.
2. Exemplary educational accomplishments beyond the classroom that provide models of excellence for the profession. Include committees, mentoring, awards, publications, and presentations.
3. Strong long-range potential for professional and policy leadership, i.e., predict the educator's potential to remain in education for at least 25 more years and demonstrate leadership in the profession.
4. Engaging and inspiring presence that motivates and impacts students, colleagues and the community. Do students perform at higher levels due to the educator, pursue certain careers, credit their success to the educator, etc.?

Cite evidence of student achievement gains as a result of the educator's practices:				
Cite awards the educator has received:				
Other comments:				
Education:				
Schools Attended	Degrees	Graduation Years		
WHITE ASIAN HISPANIC OR LATINO NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER		NATIVE AMERICAN INDIAN OR ALASKA NATIVE		
INATIVE HAVVAIIAIN OR OTHER PACIFIC ISLANDER	OTHER (please specify)			

and interview them. They should know the educator currently and very well.

NAME

TITLE

WORK PHONE

HOME PHONE

EMAIL ADDRESS

NAME

TITLE

WORK PHONE

HOME PHONE

TITLE

TITLE

TITLE

List the names and phone numbers of three professional references other than you for the educator. We will call

YOUR NAME	TITLE	

HOME PHONE



Please return this form by June 1, 2015

EMAIL ADDRESS

RELATION TO RECOMMENDED EDUCATOR (principal, colleague, etc.)

Oklahoma State Department of Education

Kasey Boes 2500 North Lincoln Boulevard Oklahoma City, Oklahoma 73105-4599

Questions?

events@sde.ok.gov or (405) 521-4893

WORK PHONE

DISTRICT