



**Diocese of Pittsburgh
Secretariat for Education
Department for Catholic Schools**

Golden Apple Award

**TEACHER'S
NOMINATION FORM***

Name of Teacher Nominee: _____

Nominator's Name: _____

() Parent and Student () Teacher

(If an elementary student nominates a teacher, a parent must also sign the Nomination Form.)

Nominated before: (Yes) _____ (Year) _____ (No) _____

Nominator's Address: _____

Nominator's Telephone No. _____

In a letter of recommendation, explain why you feel this teacher deserves a *Golden Apple Award*. Please give specific examples of the individual's unique qualities and teaching ability.

***For school's use.**