

Date Submitted: _____

This award is given each year to a person who has exemplified using information to assist their own child or someone else's child with a disability to receive a free appropriate public education. STEP seeks recipients who demonstrate teamwork and collaboration and the zeal to share the information they have learned with others. Nominees may be a parent of a child with a disability, an advocate that works with families, a teacher who has been exemplary in the life of a student with a disability, or a service provider who has bridged the gap for a student or their family to assist in receiving a free appropriate public education.

All nominees will be considered and the recipient chosen to receive the award will be contacted for further information.

Name of Nominee:

City:	State:Zip:
County:	Phone:
Email:	
Please check one:	Parent D Professional D
Role in the Student's I	Life:
	g why this nominee is deserving of the recognition. <u>Please Note:</u> Do not give tudent unless permission has been given from nominee. Use broad terms such as: has a young child, middle school r West TN.)



Include a photo of the nominee (jpg format).

Nominated by:	Name: Address:
	Phone:
Office Use Only:	Date received:

https://www.surveymonkey.com/r/WPAdvocateForm

