



STATE ADVISOR OF THE YEAR

- A. Cover sheets and additional materials are not accepted.
- B. Three active TSA chapter advisors (from the same state) must collaborate on the nomination of the state advisor. The nominating chapter advisor should submit the form, indicating contact information for the two supporting chapter advisors. The two supporting chapter advisors must have knowledge of and approve of the nomination.
- C. Only information for the last three years should be provided.
- D. State advisors may not receive this award two years in a row.
- E. Completed applications must be received by May 1st each year.

PLEASE COMPLETE

(To be completed by the nominating TSA chapter advisor)

1. Name of chapter advisor _____
School _____
Principal's name _____
School address _____
City/state/zip _____
Telephone _____ Email _____
Years as a TSA chapter advisor _____

2. Name of *TSA State Advisor of The Year* nominee _____
State education department/organization _____
Title _____
Address _____
City/state/zip _____
Telephone _____ Email _____
Years as a TSA state advisor _____

TSA State Advisor of the Year Application

MEMBERSHIP

1. Indicate the number of TSA chapter advisors in the state _____
2. Indicate the number of TSA student members in the state _____
3. Has membership increased since last year? _____
4. List major state projects that represent the state advisor's program initiatives to recruit members.

STATE CONFERENCES AND ACCOMPLISHMENTS

1. Indicate the name, approximate dates and number of attendees for state and regional competitions/conferences coordinated by the TSA state advisor over the last year.

<u>Event name</u>	<u>Date</u>	<u>Number of attendees</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. Indicate the years the state participated in the National TSA Conference?

TSA State Advisor of the Year Application

SUPPORT AND TRAINING EFFORTS

1. Describe training programs and other support offered to TSA chapter advisors

LEADERSHIP AND COMMITMENT

1. Describe the state advisor's participation in TSA at the national level (i.e., Competition Regulations Committee, Board of Directors).

2. List other professional affiliations and organizations in which the state advisor is involved.

TSA State Advisor of the Year Application

I certify that the claim and information reported on behalf of the state advisor are true and accurate.

1) Nominating chapter advisor _____

Signature _____

Date _____

2) Supporting chapter advisor _____

School _____

Email address _____

3) Supporting chapter advisor _____

School _____

Email address _____