## Minister's Award for Compassion in Teaching Application Form

| Nominee Information |  |
| :---: | :---: |
| Name: | School: |
| Position: | Region: Choose an it |
| School Community (Town, City): |  |
| Nominator Information |  |
| Name: | Relationship to Nominee: Choose an item. |
| Phone Number: | Email: |
| Recommendation and Testimonial |  |
| Describe how the teacher's extraordinary compassion in teaching made a significant difference in supporting the social, emotional and/or mental health of their school community by: <br> - Fostering relationships and partnerships; <br> - Supporting SEL and/or mental health through teaching and learning; <br> - Demonstrating leadership (e.g. mentoring, sharing practices, initiating projects); and <br> - Using inclusive and equitable practices in the physical and social environment. |  |
| If an additional testimonial(s) is being provided by someone other than the nominator, list the name(s). |  |
| 1. |  |
| 2. |  |

[^0]Application Form

## Minister's Award for Compassion in Teaching Additional Testimonial (Optional)

| Nominee Information |  |
| :---: | :---: |
| Name: | School: |
| Position: | Region: Choose an item. |
| School Community (Town, City): |  |
| Testimonial Provided By: |  |
| Name: | Relationship to Nominee: Choose an item. |
| Phone Number: | Email: |
| Testimonial |  |
| How has the teacher's extraordinary compassion in teaching positively impacted you, students, colleagues, families, and/or the school community at large? Please refer to nominating criteria. |  |


[^0]:    Minister's Award for Compassion in Teaching

