



## PARENT(S) OF THE YEAR

This award is presented to a parent who has demonstrated outstanding abilities at parenting the gifted child through involvement in and dedication to his/her school, community, and/or the State of Georgia.

### Criteria:

The nominee must not be a previous winner of this award.

### Procedure:

The nomination packet must include:

- 1) Completed nomination form (below)
- 2) Nominator's reasons for the nomination, not to exceed two typed pages
- 3) One additional letter of support for the nomination

### Recognition:

The award recipient(s) will be recognized at the annual GAGC convention. He and/or she will receive a complimentary registration to this year's convention, a plaque presented at the convention, and a letter of recognition from the GAGC President.

### Nomination Form

Date of Nomination: \_\_\_\_\_

Name of Nominee(s)/ Contact Person(s): \_\_\_\_\_

Nominee/Contact Home Address: \_\_\_\_\_

Nominee/Contact City, State, Zip Code: \_\_\_\_\_

Nominee/Contact E-mail: \_\_\_\_\_

Nominee/Contact Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Nominee/Contact GAGC Membership Status: \_\_\_\_\_

Name of Nominator: \_\_\_\_\_

Nominator Home Address: \_\_\_\_\_

Nominator City, State, Zip Code: \_\_\_\_\_

Nominator E-mail: \_\_\_\_\_

Nominator Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Nominator GAGC Membership Status: \_\_\_\_\_

**Nominations shall be submitted by November 30.**

**Complete online, mail, or fax application to:**

GAGC Awards Committee  
1579F Monroe Drive, #321  
Atlanta, GA 30324  
Fax: 404-875-2284