

Illinois Association for Health, Physical Education, Recreation & Dance



affiliated with
MID-WEST ASSOCIATION FOR HEALTH, PHYSICAL EDUCATION, RECREATION AND DANCE

and the
AMERICAN ALLIANCE FOR HEALTH, PHYSICAL EDUCATION, RECREATION AND DANCE

ILLINOIS AHPERD & MIDWEST DISTRICT AAHPERD RECREATIONAL PROFESSIONAL/LEISURE EDUCATOR OF THE YEAR Application Packet

Definition

A recreation professional/leisure educator is defined for the purposes of this award as an individual who has major responsibility for leadership in the recreation/leisure profession or teaching recreation/leisure education (studies) at the college/university level.

Eligibility Requirements

Any person, who meets the eligibility requirements and exemplifies the criteria for this award as outlined below, may apply or be nominated by a colleague.

Eligibility requirements include:

1. **This is a State/Midwest District Award and is not awarded at the national level. The Illinois State award winner will be advanced to Midwest District AAHPERD for consideration.**
2. Candidates shall be a current member of AAHPERD and Illinois AHPERD.
3. Candidates shall be persons who have exhibited outstanding and creative leadership in the recreation profession or as an innovative leisure educator at the college/university level.
4. The Recreation Professional/Leisure Educator of the Year from Illinois will present a session at the Illinois AHPERD State Convention in November.
5. Candidates should be either currently involved in recreation leadership pursuits or as illustrated by having:

- Delivered speeches, presentations, consultations, and/or demonstrations at workshops and/or conferences,
 - Made a significant contribution in the area of recreation/leisure in various areas such as publications and service at the national, district, and/or state level, and
 - Demonstrated a vitality of contemporary and future-centered leisure thought and theory.
6. Degree in and certification as a recreation professional/leisure educator.
 7. Verification of teaching assignment from your place of employment.

Please note: Current members of AAPAR Executive Committees are not eligible to apply for this award.

Teaching Assignment

Teachers/professional leisure educators may have responsibility for teaching general PE, but applications can be submitted only for the recreation professional/leisure education part of the teaching assignment. A staff member/administrator who can attest to the applicant's assignment must complete a form included in the packet.

Application Procedures

All applicants must submit 1 typed and complete application to the Illinois District President of the district you reside by **March 1**. Application materials should include:

1. Midwest District Awards Application Cover Sheet (located at the back of this application packet);
2. Support materials, and publicity forms, filled out completely and typed using times New Roman 12 point font;
3. Written documentation demonstrating compliance with the award qualifications as it applies to his/her situation (resumes or vitae not accepted);
4. A current **letter of recommendation** from applicant's administrator or colleague. The letter should be directly related to the award qualifications providing a biographical sketch outlining the contributions of the applicant and how these contributions are deserving of recognition;
5. A 3½" X 2½" (wallet size) photograph that will not be returned; and
6. The **verification of teaching assignment** from your place of employment.

Note: Applications that are forwarded to AAHPERD for Midwest District consideration must be on forms that are included in this packet and comply with all guidelines described here or they will not be considered.

State and AAHPERD District Selection and Recognition Process

1. IAHPERD District Presidents must receive **one (1) typed and complete application** by **March 1**. Send your application to your state-district president. Contact information for your Illinois District president is available on the IAHPERD Website: www.iahperd.org. **The State Association will re-direct all submitted names and applications for Recreation Professional/Leisure Educator of the Year to the appropriate IAHPERD District President or appointed designee.**
2. State District Presidents will present their District winners to the IAHPERD Recognition/Awards Committee by **April 1**.
3. The IAHPERD Recognition/Awards Committee will present one candidate for Illinois Recreation Professional/Leisure Educator of the Year for approval at the **April** meeting of the IAHPERD Executive Board. The state winner will be contacted in early **May**.
4. The IAHPERD Recreation Professional/Leisure Educator recipient will submit six (6) copies of their revised applications to the Midwest District AAHPERD Recognition/Awards Committee Chair by **August 15**. Specific directions will be given to the IAHPERD TOY winners.
5. The Midwest District Recreation Professional/Leisure Educator of the Year will be selected at the annual meeting of the Midwest District leadership in **late September or early October**. All winners of this award will be officially notified by Midwest District within two weeks of the Midwest District AAHPERD Leadership Conference.
6. The Midwest District Recreation Professional/Leisure Educator of the Year Award will be presented to the recipient at the Illinois AHPERD Recognition/Awards dinner in November.
7. The Midwest Recreation Professional/Leisure Educator of the Year Award recipient is encouraged to complete an application for one of the American Association for Physical Activity and Recreation (AAPAR) awards (including letters of recommendation and a publicity form) by December 1. The application materials should be sent to the AAPAR Awards Committee, American Association for Physical Activity and Recreation, 1900 Association Drive, Reston, VA 20191, for national consideration.

**ILLINOIS ASSOCIATION FOR HEALTH, PHYSICAL EDUCATION,
RECREATION AND DANCE**

**ILLINOIS/MIDWEST DISTRICT AAHPERD
RECREATION PROFESSIONAL/LEISURE EDUCATOR OF THE YEAR (TOY)**

OFFICIAL APPLICATION FORM

To be completed by nominee

Detach the application, publicity, and verification of assignment forms from the rest of the packet and send them along with your letters of recommendation to your IAHPERD District President by **March 1**.

Should the space provided prove insufficient, please use additional sheets, clearly marking each item. You may create your own computer-generated copy of this form (recommended).

Applicant's Name:

Name You Wish To Be Called:

Name to Use in Writing (certificates, press releases, etc.)

Home Address:

City/State/Zip:

Home Phone:

Home Email Address:

Present Position/Title:

School Name:

Address:

City/State/Zip

School Phone:

FAX:

School Email:

Educational Information:

College/University

Major

Bachelors Degree

Masters Degree

Doctoral/Prof. Degree

Career Information:

Position

Location

Length of Service

Professional Affiliations:

NASPE/AAHPERD Membership #:
NASPE Activities (offices, articles, etc.)

Expiration Date:

Years of Membership:

District AAHPERD:
District Offices/Divisions or Project Activities:

State AHPERD

Membership #:

Expiration Date:

Years of Membership:

Other Professional Affiliations:

Significant Achievements in the Field of Recreation Professional/Leisure Education:

Community Service:

(Type and Dates)

**ILLINOIS ASSOCIATION FOR HEALTH, PHYSICAL EDUCATION,
RECREATION AND DANCE**

**ILLINOIS/MIDWEST DISTRICT AAHPERD
RECREATION PROFESSIONAL/LEISURE EDUCATOR OF THE YEAR**

SUPPORT INFORMATION AND PUBLICITY FORM

To be completed by nominee

State: **ILLINOIS**

AAHPERD District: **MIDWEST DISTRICT**

Applicant's Full Name:

Applicant's Home Address:

Applicant's Home
Email Address:

Applicant's Work
Email Address:

Applicant's Home Phone:

Applicant's Work Phone:

School District Information:

Superintendent's Name:

Address:

Superintendent's Email Address:

Phone:

Principal's Name:

Principal's Email Address:

Phone:

Program/Dept Chair's Name and Title:

Dept Chair's Email Address:

Phone:

School District Name:

Administrative Offices Address:

School District Public Relations Officer:

PR Officer's Email Address:

Phone:

Newspapers:

Newspaper #1:

Address:

Phone:

Editors Email Address:

Editor:

FAX:

Newspaper #2:
Address:
Phone:
Contact Person's Email Address:

Editor:
FAX:

Television Station:

Station Name/Call Letters:
Address:
Phone:
Editors Email Address:

Contact Person:
FAX:

Station Name/Call Letters:
Address:
Phone:
Editors Email Address:

Contact Person:
FAX:

Government Officials:

State Legislator:
Address:
Email Address:

U.S. Congress Rep:
Address:
Email Address:

U.S. Senator:
Address:
Email Address:

U.S. Senator:
Address:
Email Address:

Others: list others, including titles and addresses, to which your progress in this program should be reported. Use additional sheets if necessary.

**VERIFICATION OF ASSIGNMENT FOR
RECREATION PROFESSIONAL/LEISURE
EDUCATOR OF THE YEAR**

I attest to the fact that this applicant, _____, for the Recreation Professional/Leisure Educator of the Year, does, in fact, have a major responsibility for leadership in the recreation/leisure profession or teaching recreation/leisure education (studies) at the college/university level.

Name

Title

Date

**Midwest District of the American Alliance
for Health, Physical Education, Recreation, and Dance**

AWARD APPLICATION COVER SHEET



The **award cover sheet** must be typed and completed in detail to be considered for an award. This form needs to be accompanied by a **maximum of one page for each of the award qualifications** (typed, double-spaced). Also, letters of recommendation specifically addressing the applicant's qualifications for the award need to be attached. Resumes or vitae will not be accepted. **Six (6) copies** of the application materials should be mailed to the Midwest Recognition and Awards Committee Chair and be postmarked on or before **August 15** to be included in this year's selection process.

**Award Category: Midwest District AAHPERD Recreational Professional/Leisure
Educator of the Year**

PERSONAL DATA

Full Name: _____
Home Address: _____
City/State/Zip: _____
Professional Address: _____
City/State/Zip: _____
Phone (H): _____ (W): _____ Email: _____

EDUCATION Institution Major Dates

Bachelor's _____
Masters _____
Doctorate _____
Professional Experience (Position/Location/Dates of Service):

PROFESSIONAL AFFILIATIONS state membership & # _____

Number of Years AAHPERD Member: _____ Current Membership #: _____
State/District/National Service (Committees, Offices, etc. with dates of service):

Community Service & Achievements / Honors (with dates of service):

