

**2016 - 2017 California Teacher of the Year
Sonoma County Office of Education
Applicant Interest Form**

First Name: _____ **Last Name:** _____

District: _____ **School:** _____

Preferred Designation: *Mr.* *Mrs.* *Ms.* *Dr.*

Home Address: _____

City and Zip: _____

Email address: _____ **Cell Phone:** _____

Best Time of Day to Reach You: _____

Total Years Teaching Experience: _____ **Years in Current Position:** _____

Major Subject Area(s), if Any: _____

Credentials: _____ **Degrees:** _____

Superintendent: _____

Superintendent's Signature: _____ **Date:** _____

You will need to submit:

1. This short form
2. No more than a three-page response that addresses the following five questions. *The response must be typed in a 12 point font, single spaced and have one inch margins.*
 - A. How have you focused on closing the achievement gap to meet the needs of all students?
Please provide an example of how you do this and evidence of the impact.
 - B. How have you demonstrated educational and/or professional development leadership in your school or district?
 - C. How have you implemented 21st century teaching practices in your classroom?
 - D. How have you contributed to the success of your grade level, department, or school?
 - E. How do you involve/utilize the community in your classroom?
3. Two current letters of support: one from your principal and one from your superintendent

All materials must be returned no later than Monday May 16th to:

The Sonoma County Office of Education
Superintendent's Office, Attention: Anne Layton
5340 Skylane Blvd Sant Rosa, CA 95403