**Early Childhood Teacher of Year Application Appendix**

*The tools in this appendix are for guidance and support only. Unless the appendix specifically states “must have,” the applicant can modify their submission in any way of their choosing, so long as the information given is clear and legible to the reviewing team. If you have any questions about your submission materials, please contact* [*devon.camarota@la.gov*](mailto:devon.camarota@la.gov)*.*

**Appendix A: Teaching Video Must Haves**

Accompany video submission with LDOE-created consent forms signed by all [families of children](https://www.louisianabelieves.com/docs/default-source/awards/student-consent-form.docx?sfvrsn=98d9911f_4) or [staff members](https://www.louisianabelieves.com/docs/default-source/awards/candidate-consent-form.docx?sfvrsn=9bd9911f_4) in the video.

* Record 10 full and continuous minutes of instruction and interactions with children
* Clearly state at the beginning of the video, or in the submission description, the age of children in the classroom and type of lesson or part of day that is being filmed
* Demonstrate multiple teaching skills from the CLASSⓇ rubric such as positive interactions, language modeling, teacher sensitivity, etc.
* Ensure that audio of teacher and children is clearly heard throughout the video

*Teaching videos should be an authentic capture of your normal classroom day. Please do not feel compelled to create a “perfect” video. The LDOE wants to see how your children experience your classroom every day.*

**Appendix B: Family and Child Interview Guidance**

* Accompany video submission with LDOE-created Consent forms signed by all families/children in the video
* Interviewees should be sitting still in one place
* Video length should not exceed 10 minutes
* Questions for children can include:
  + How do you feel about [Teacher name]?
  + How do you feel about the classroom/center?
  + What does [Teacher name] help you with?
  + What does [Teacher name] teach you?
  + How does [Teacher name] make you feel?
* Questions for family members can and should include:
  + What growth or development have you seen from your child since being in [teacher name]’s classroom?
  + What makes [Teacher name] an excellent teacher?
  + Would you recommend other parents to place their children in [Teacher name]’s classroom? Why?
  + How does your child feel about school?
  + How does your child feel about [Teacher name]?
  + What would you like to say to [Teacher name] about their impact on your child(ren)?
  + How has [Teacher name] helped your child(ren)?

**Appendix C: Resumé Guidance**

Teacher resumés should include:

* Education history
  + High school or GED program or degrees, ECAC program or certificates, higher education program or degrees (Associate’s, Bachelor’s, Master’s, etc.), dates of attendance or completion or estimated date of completion
  + Grade point average, special honors or recognition, class rank, or additional certificates as applicable
  + Location or institution where program was completed
* Work History
  + All current and recent employers
  + Title of job at each employer
  + Contact number for each employer
  + Brief description of responsibilities at each employer
  + Start and end date of employment at each employer (if still employed, indicate “[start date] - present”)
* Other Skills
  + List of other skills, talents, extracurricular activities, or experiences
    - *Anything that the teacher does outside of the classroom; recreational sports teams, musical instrument skills, participation in local community events, volunteer work, hobbies, etc.*

**Appendix D: Resumé Template:**

*This template is optional for applicants. If you have an already established resume with a different format, do not feel obligated to remake in this format. This is a guidance tool for those who may need additional assistance.*

**Directions**: Delete and replace all *italicized* entries for those that apply to the teacher candidate for Teacher of the Year.

*Name*

*Address*

*Phone Number*

*Email*

**Education History**

| Institution or Program | Dates Attended | Degree, Scores, Special Honors |
| --- | --- | --- |
| *Louisiana State University, Baton Rouge* | *August 2016 - June 2018* | *Bachelor’s Degree in Early Childhood Education, 3.6 GPA, Dean’s List* |
| *Baton Rouge Magnet High School* | *August 2012-June 2016* | *High School Diploma, 4.0 GPA, National Honors Society* |

**Work History**

| **Employer** | **Job Title and Responsibilities** | **Dates Employed** |
| --- | --- | --- |
| *Magical Unicorn Child Care Center, Baton Rouge, 225-555-0111* | *Infant Classroom Teacher*   * *Provide care to a classroom of 4 infants, such as feed, change diapers, clean infants and spaces as needed* * *Provide education such as talking to infants, introducing infants to new words, and building trust with smiles and eye contact* | *July 2016-Present* |
|  |  |  |

**Special Skills**

| **Skill** | **Description of experience and relevant dates** |
| --- | --- |
| *Running* | *I have run three marathons after getting into road running in 2013. I regularly train and compete in races from 5k distance to marathons to stay healthy.* |
| *Singing* | *I sing every Sunday in my house of worship’s choir. I have led the Winter pageant, including leading rehearsals and directing the performance, in 2017, 2018, and 2019.* |

**Appendix E: Guidance on Video Tour of Classroom or Center**

Video tour should be no more than ten minutes and include:

* Audio describing each area of the classroom and its purpose
* Materials in the classroom and how they support specific elements of child development
* Anything specialized to teacher’s unique teaching environment, that makes the classroom extraordinary
  + Ex: *“And this is my ukulele that I learned to play when I was in high school. I use it to help the children transition from the carpet to the table. Here’s the song I sing…”*

**Appendix F: Letter of Recommendation for Past and Present Employers, Co-workers, or Family of Children Served**

*Using this template is not mandatory. This is a guiding tool for anyone who may need or want additional assistance.*

| **Name of Recommender** | **Relationship and Place of Professional Relationship** | **Dates of Professional Relationship** |
| --- | --- | --- |
|  |  |  |
| **Date of Letter:**  **Letter of Recommendation (should be no more than 1,000 words)**  **Signature:** | | |
|