

2019, 2020, & 2021
AWARDS/SCHOLARSHIPS APPLICATION BOOKLET

RIVHSA
HEAD
START
*Celebrating
Heroes*



Guidelines & Applications for RIVHSA Awards & Scholarships

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Section I - NATIONAL & REGIONAL OVERVIEW

A. About the Process

In Region IV, grantees have a total of **20** award and scholarship categories open for nominations. The National Head Start Association (NHSA) has **5** national categories which are also supported at the regional level by the Region IV Head Start Association (RIVHSA). In addition, RIVHSA offers **15** special categories exclusively for our regional grantees that are not recognized at the national level. Grantees and state affiliates must submit nominations as specified by each entity to be considered. The national and regional processes are outlined below.

B. Nomination & Selection Calendar

March 15	RIVHSA's region-specific awards and scholarships application booklet available @ www.rivhsa.org .
June 20	UPDATE POSTED @ www.rivhsa.org - RIVHSA's region-specific awards and scholarships application booklet.
June 20 – August 15	State affiliates accept nominations from local programs using the RIVHSA nomination forms. State affiliates review nominations received from local programs and make selection for state recipients.
August 15	Deadline for state affiliates to send selected recipients to RIVHSA for national and region-specific categories.
August 16 – September 30	RIVHSA reviews applications for completeness and assembles judging packets.. RIVHSA assembles a panel of judges to review and score state nominations for national and region-specific categories. RIVHSA judging panel reviews nominations received for national and region-specific categories and selects regional recipients.
October 1-15	Regional recipients for national and region-specific categories announced at 1 st Quarter Board Meeting. RIVHSA notifies state affiliates and nominating grantees of regional recipients for national and region-specific categories.
October 15-December 15	RIVHSA compiles awards program using recipient and nominee information.
February	RIVHSA holds an award ceremony at its annual conference to recognize regional recipients.
April	NHSA holds an award ceremony at its annual conference to recognize national recipients.

Section II - NHSA: NATIONAL CATEGORIES

A. General information

Local grantees interested in nominating applicants for the categories listed below must apply using RIVHSA nomination forms. RIVHSA is not responsible for any expenses incurred by organizations or individuals participating in this process. NHSA is the lead organization for these categories and determines the regional nomination and selection criteria for the categories listed below:

1. Edward Zigler Innovation Award
2. Sargent Shriver Excellence in Community Service Award
Regionally known as the Billy J. McCain, Sr. Excellence in Community Service Award
3. Aubrey Puckett Memorial Award
Regionally known as the Dr. Arvern Moore Memorial Award
4. Vanessa Rich Leadership Award
5. Ron Herndon Scholarship for Head Start Parents

B. General Rules for National Categories

1. All scholarship and award applications must reflect services contributed during the calendar year 2018.
2. Applicant must be associated with a program that is a current member of NHSA.
3. Applicant must be associated with a program that is a current member of RIVHSA and its state association.
4. An individual may not be nominated for more than one scholarship or award per year.
5. Local member programs may not nominate more than one person or program.
6. Individuals selected for an award or scholarship must be able to provide a Social Security number and other required information to redeem cash awards.
7. Applicant must be willing to allow NHSA to publicize their nomination through a variety of media channels including publications, social media, and websites.
8. Nominees will be contacted primarily by e-mail.
9. NHSA scholarship and award winners serve as models and ambassadors for the Head Start Community. During their year, winners will be encouraged to share successful strategies with others during NHSA conferences, institutes and gatherings.
10. NHSA board members, staff, and family members are ineligible.

Section III - RIVHSA: REGION-SPECIFIC CATEGORIES FOR REGION IV GRANTEES ONLY

A. General information

RIVHSA offers several regional categories which are not recognized at the national level, therefore, state nominees submitted to RIVHSA will compete at the regional level only for these categories. Local grantees interested in nominating applicants for the categories listed below must apply using RIVHSA nomination forms. RIVHSA is not responsible for any expenses incurred by organizations or individuals participating in this process. RIVHSA is the lead organization for these categories and determines the regional nomination and selection criteria for the categories listed below:

1. Administrator of the Year Award
2. Teacher of the Year Award
3. Support Staff of the Year Award
4. Beating the Odds Award
5. Parent of the Year Award
6. Staff of the Year Award
7. Achievement Award: Disabilities Services Coordinator
8. Oral Health Award
9. Humanitarian of the Year Award
10. Corporate Award
11. Father of the Year Award
12. Scholarship for the Hearing Impaired
13. Scholarship - Head Start Staff, Higher Education
14. Scholarship - Head Start Alumni, High School Senior
15. Scholarship - Head Start Parent, Post-Secondary Education

Guidelines & Applications for RIVHSA Awards & Scholarships

B. Application Process

RIVHSA's application process has three distinct phases. At the conclusion of each phase, the most competitive applicants continue in the process.

1. **Local Program:** Grantees determine nominees from their agency for category in accordance with RIVHSA guidelines and submit nominations to their state affiliate. Grantees should contact their state affiliate for state-specific filing deadlines. Grantees are encouraged to recognize their nominees at the local level. See additional grantee requirements below – III(C),(D).
2. **State Association:** Affiliates establish their nomination and selection process in accordance with RIVHSA timelines and guidelines. Affiliates must forward their state nominees by postal mail only to RIVHSA by **August 15** for the selection of regional recipients. Affiliates are encouraged to recognize their nominees at the state level. See additional affiliate requirements below– III(C),(D),(E).
3. **Regional Association:** A panel of judges selected by RIVHSA reviews and scores state affiliate nominations. RIVHSA's Awards/Scholarships Committee confers and announces regional recipients at the RIVHSA's 1st quarter Board of Directors meeting. RIVHSA also notifies grantees and state associations upon their nominee's selection as a regional recipient. At an awards ceremony during its annual conference, RIVHSA recognizes regional recipients.

C. General Rules for Region-Specific Categories

1. In order to be considered for national and regional categories, grantees and state affiliates must be current RIVHSA members. Membership status will be verified by RIVHSA; non-member applications will not be considered.
2. State affiliates may not nominate an individual, grantee or organization for more than one category per year.
3. Nominations submitted without the required documentation will not be considered.
4. All scholarships and award nominations must be submitted by postal mail only to RIVHSA by **August 15**.
5. All scholarship and award applications must reflect services contributed during the specified program year.
6. All criteria for an award or scholarship must be met. Incomplete applications will not be considered. RIVHSA will review all applications for completeness in accordance with NHSA guidelines and deadlines.
7. Individuals selected for an award or scholarship must be able to provide a Social Security number and other required information to redeem cash awards.
8. Applicant must be willing to allow RIVHSA to publicize their nomination through a variety of media channels including annual publications and websites.
9. Scholarship and award recipients are invited to attend the awards ceremony which will be held during RIVHSA's Annual Training Conference each February. RIVHSA is not responsible for housing, transportation, or other expenses associated with attending the awards ceremony.
10. State affiliates and nominating grantees will be contacted primarily by e-mail.
11. RIVHSA Scholarship and Award recipients serve as models and ambassadors for the Head Start community. During their year, winners will be encouraged to share successful strategies with others during RIVHSA conferences, institutes and gatherings.

D. Grantee Roles & Responsibilities

When nominating candidates for an award or scholarship, local programs must:

1. Meet the following qualifications of membership: (1) their state association must be a member in good standing with RIVHSA, (2) their agency must be a member in good standing with their respective state association, and (3) their agency must be a member in good standing with RIVHSA.
2. Contact their state association for state deadlines to submit nominations. (See directory of state associations on page 5).
3. Submit complete applications on the correct form. Incomplete applications or incorrect forms will not be considered.
4. Assume responsibility for all expenses related to the application process or the attendance of recipients or nominees at the awards ceremony (i.e. entrance ticket, lodging, per diem, transportation). RIVHSA is not responsible for any expenses incurred by organizations or individuals.
5. Provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program for regional recipients. Send digital files to Frances Starr at fstarr@rivhsa.org.

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E. State Affiliate Roles & Responsibilities

1. Presidents are asked to designate a representative for the selection of award and scholarship nominees to ensure that all applications are processed and submitted in a timely manner for competition at the regional level.
2. Incomplete applications or those submitted on incorrect forms must not be considered for award at the state level.
3. Applications that arrive without a completed State Confirmation Form will not be accepted by RIVHSA.
4. State associations must submit all state nominees by postal mail only to RIVHSA by **August 15**. Please send the original and 3 complete copies of each state nominee to:

RIVHSA
ATTN: Awards/Scholarships Committee
Post Office Box 1049, Snellville, GA 30078

5. RIVHSA will notify grantees and state associations upon their nominee's selection as a regional award or scholarship recipient. State associations are asked to share the regional list of recipients with all state nominees to include non-winners.
6. Provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program for regional recipients. Send digital files to Frances Starr at fstarr@rivhsa.org.

F. Focus Area Awards: Administrator of the Year, Staff of the Year, and Support Staff of the Year

The focus area rotates on an annual basis for these awards. RIVHSA determines the focus area for the award category. The schedule is as follows:

	Administrator of the Year	Staff of the Year	Support Staff of the Year
2019	Head Start and/or Early Head Start Director	Early Childhood Development/Health: Transition Emphasis	Technology Services
2020	Grantee Executive Director	Family Services	Nutrition Services
2021	Head Start and/or Early Head Start Center Director	Early Childhood Development/Health: Nutrition Emphasis	Transportation Services

SECTION IV - OTHER IMPORTANT REGIONAL INFORMATION

A. Scholarship Recipients

RIVHSA scholarship recipients must present proof of acceptance or enrollment at an institution of higher learning, current class schedule, and possess a 2.5 cumulative GPA to receive their one-time monetary award. A runner-up is selected for each scholarship in the event that the recipient is determined ineligible or fails to comply with verification guidelines. RIVHSA will award scholarship recipients as follows upon verification of eligibility:

1. Ron Herndon Scholarship for Head Start Parents: \$500 one-time scholarship award.
2. Scholarship - Head Start Staff, Higher Education: \$1,000 one-time scholarship award.
3. Scholarship - Head Start Alumni, High School Senior: \$1,500 one-time scholarship award.
4. Scholarship - Head Start Parent, Post-Secondary Education: \$500 one-time scholarship award.
5. Scholarship for the Hearing Impaired: \$500 one-time scholarship award.

B. Awards Gala

RIVHSA celebrates the contribution and achievement of regional award and scholarship recipients at our annual event. This event is held in conjunction with our annual conference and detailed gala information is in the annual conference brochure which is available at www.rivhsa.org.

Admission to the gala is included in conference registration. Event tickets are available for those wishing to attend the gala only. Advance ticket purchase is required. The designated attire for this event is semi-formal to formal. RIVHSA is not responsible for expenses related to event attendance by regional nominees or recipients.

Guidelines & Applications for RIVHSA Awards & Scholarships

State Confirmation Form

State associations must complete this form and attach it to applications submitted to RIVHSA. Applications that arrive without a completed State Confirmation Form will not be accepted.

Date		State Association	Circle One:	AL	FL	GA	KY	MS	NC	SC	TN
State President											
Mailing Address											
City					State		Zip Code				
Telephone					Fax						
E-mail											

- Please check the boxes for each RIVHSA award/scholarship application being submitted by your state.
- RIVHSA must receive all nominations by **August 15**.
- For each nominee, enclose the original application packet and 3 complete copies by postal mail only to the address below:

RIVHSA
ATTN: Awards/Scholarships Committee
Post Office Box 1049, Snellville, GA 30078

NATIONAL CATEGORIES	
	1. Edward Zigler Innovation Award
	2. Sargent Shriver Excellence in Community Service Award <i>Regionally known as the Billy J. McCain, Sr. Excellence in Community Service Award</i>
	3. Aubrey Puckett Memorial Award <i>Regionally known as the Dr. Arvern Moore Memorial Award</i>
	4. Vanessa Rich Leadership Award
	5. Ron Herndon Scholarship for Head Start Parents
REGIONAL CATEGORIES	
	1. Administrator of the Year Award
	2. Teacher of the Year Award
	3. Staff of the Year
	4. Support Staff of the Year Award
	5. Achievement Award – Disability Services Coordinator
	6. Oral Health Award
	7. Beating the Odds Award
	8. Parent of the Year Award
	9. Father of the Year Award
	10. Humanitarian of the Year Award
	11. Corporate Award
	12. Scholarship for the Hearing Impaired
	13. Scholarship - Head Start Staff, Higher Education
	14. Scholarship - Head Start Alumni, High School Senior
	15. Scholarship - Head Start Parent, Post-Secondary Education

This confirms that the _____ Head Start Association is submitting the RIVHSA award and scholarship applications as indicated above. The applicants meet the award criteria and nominating programs are current RIVHSA members.

Signature of State President

Date

Directory of State Associations (June 20, 2018)

Alabama Head Start Association

PO Box 158, Hayneville, AL 36040
P|334.548.2145
www.alabamaheadstartassociation.org

Samita Jeter, President
samitajeter@lowndesboe.org

Florida Head Start Association

111 N. Gadsden Street, Tallahassee, FL 32303
P|850.694.6477
www.flheadstart.org

Louis Finney, President
lfinney@lsfnet.org

Wanda Minick, Executive Director
wanda@flheadstart.org

Georgia Head Start Association

815 Park North Boulevard, Clarkston, GA 30021
P|404.929.2457
www.georgiaheadstart.org

Tanya Thomas, President
tthomas@cpheadstart.org

Tevin Roberts, Executive Director
gaheadstartassociation@gmail.com

Kentucky Head Start Association

101 Burch Court, Frankfort, KY 40601-8353
P|502.607.0770
www.khsa.org

Pamela Smith, President
psmith@ckyhs.org

Allyson Shelton, Executive Director
kyheadstart@gmail.com

Mississippi Head Start Association

921 North Congress Street, Jackson, MS 39202
P|601.969.6979
www.msheadstart.org

Eloise McClinton, President
emccclinton@ics-hs.org

Nita Norphlet-Thompson, Executive Director
nthomps@bellsouth.net

North Carolina Head Start Association

122 Ben Lee Road, Thomasville, NC 27360
P|336.905.3428
www.ncheadstart.org

Terry David, President
tdavid@durhamhs

Christy Jones, Manager
christy@newframellc.com

South Carolina Head Start Association

2700 Middleburg Drive, Ste 213, Columbia, SC 29204
P|803.771.9404
www.sc-headstart.org

Dr. Arthur Brewton, President
abrewton@pcasp.org

Jessica McMoore, Executive Director
jmccap@bellsouth.net

Tennessee Head Start Association

Post Office Box 769, South Pittsburg, TN 37380
P|423.413.3873
www.tnheadstart.info

Judy Graham, President
judygra423@aol.com

Karen Baxter, Executive Director
Kbaxter6785@charter.net

NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION Edward Zigler Innovation Award

NHSA Description

Since Head Start's inception in 1965, Dr. Zigler has played a central role in the ongoing development of our program design. This award is to celebrate those local programs who have partnered to create high impact services to children and families.

RIVHSA will present the recipient with a commemorative plaque and \$100 award.

NHSA Award-Specific Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Nominee must be a Head Start/Early Head Start grantee, delegate or community partner that has demonstrated innovation in program design and/or service delivery.
2. Submit two letters of reference from two organizational leaders who know the impact of the innovation first hand.
3. Submit a supporting statement to address the following, in its entirety:
 - a. A description of the primary and partner agency involved in the delivery of services. Provide key demographic information and history in the local community.
 - b. A brief description of the specific innovation being nominated, the approach and names of all partners.
 - c. A brief description of the outcomes or impact of the effort on vulnerable children and families that are unique and/or go beyond Head Start's performance standards.

NHSA General Rules and Regulations:

11. All scholarship and award applications must reflect services contributed during the calendar year 2018.
12. Applicant must be associated with a program that is a current member of NHSA.
13. Applicant must be associated with a program that is a current member of RIVHSA and its state association.
14. An individual may not be nominated for more than one scholarship or award per year.
15. Local member programs may not nominate more than one person or program.
16. Individuals selected for an award or scholarship must be able to provide a Social Security number and other required information to redeem cash awards.
17. Applicant must be willing to allow NHSA to publicize their nomination through a variety of media channels including publications, social media, and websites.
18. Nominees will be contacted primarily by e-mail.
19. NHSA scholarship and award winners serve as models and ambassadors for the Head Start Community. During their year, winners will be encouraged to share successful strategies with others during NHSA conferences, institutes and gatherings.
20. NHSA board members, staff, and family members are ineligible.

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NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION Edward Zigler Innovation Award

Be sure to complete the form below in its entirety. All fields are required. Please type or print clearly.

Nominee

Nominee		Social Security #		Date	
Professional Title					
Mailing Address of Nominee					
City		State		Zip Code	

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name					
Head Start or Early Head Start Director					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Membership Information

Category	Membership #
National Head Start Association	
Region IV Head Start Association	
Your State Head Start Association	

Submission Checklist

- ☐ Nominee must be a Head Start/Early Head Start grantee, delegate or community partner that has demonstrated innovation in program design and/or service delivery.
- ☐ Two letters of reference from two organizational leaders who know the impact of the innovation first hand.
- ☐ The nominee must submit a supporting statement to address the following, in its entirety:
 - ☐ A description of the primary and partner agency involved in the delivery of services. Provide key demographic information and history in the local community.
 - ☐ A brief description of the specific innovation being nominated, the approach and names of all partners.
 - ☐ A brief description of the outcomes or impact of the effort on vulnerable children and families that are unique and/or go beyond Head Start's performance standards.

Guidelines & Applications for RIVHSA Awards & Scholarships

NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION

Sargent Shriver Excellence in Community Service Award

Regionally known as the Billy J. McCain, Sr. Excellence in Community Service Award

NHSA Description

This award celebrates an individual's or organization's significant achievement through innovative community service to Head Start and Early Head Start. The nominee for this award should have excelled in addressing issues of poverty, early education, or community health.

Regionally known as the Billy J. McCain, Sr. Excellence in Community Service Award: For more than 40 years, Billy J. McCain, Sr. gave distinguished service as an advocate, officer and board member for numerous local, state, regional and national organizations that are committed to improving the lives of children and families. During his tenure as Executive Director at the Bolivar County Community Action Agency, Inc., the organization expanded its scope of services, increased funding levels, and enriched the lives of thousands of Head Start children and their families within the community. He was dedicated to fighting the War on Poverty, elevating the less fortunate in the Mississippi Delta, and placing national poverty issues in the forefront of advocacy and social policy. He served as President of the Region IV Head Start Association and also held other leadership positions within the organization. RIVHSA acknowledges his contribution to the development and growth of the organization as well as his legacy as a Head Start and Community Action pioneer.

RIVHSA will present the recipient with a commemorative plaque and \$100 award.

NHSA Award-Specific Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Nominee must be an individual or organization that made an innovative contribution of time and effort that has had a positive impact upon children, families, and/or communities.
2. Submit two letters of reference from two organizational leaders who know the impact of the service to the community.
3. Submit a response to the following, in its entirety:
 - a. A statement describing key demographic information and history of the local community
 - b. A brief description of the specific contribution(s) being nominated, the approach and name(s) of key leaders of the effort.
 - c. Please provide a brief description of the outcomes or impact of the effort on vulnerable children and families that are unique and/or go beyond Head Start's performance standards.

NHSA General Rules and Regulations:

1. All scholarship and award applications must reflect services contributed during the calendar year 2018.
2. Applicant must be associated with a program that is a current member of NHSA.
3. Applicant must be associated with a program that is a current member of RIVHSA and its state association.
4. An individual may not be nominated for more than one scholarship or award per year.
5. Local member programs may not nominate more than one person or program.
6. Individuals selected for an award or scholarship must be able to provide a Social Security number and other required information to redeem cash awards.
7. Applicant must be willing to allow NHSA to publicize their nomination through a variety of media channels including publications, social media, and websites.
8. Nominees will be contacted primarily by e-mail.
9. NHSA scholarship and award winners serve as models and ambassadors for the Head Start Community. During their year, winners will be encouraged to share successful strategies with others during NHSA conferences, institutes and gatherings.
10. NHSA board members, staff, and family members are ineligible.

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NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION

Sargent Shriver Excellence in Community Service Award

Regionally known as the Billy J. McCain, Sr. Excellence in Community Service Award

Be sure to complete the form below in its entirety. All fields are required. Please type or print clearly.

Nominee

Nominee		Social Security #		Date	
Professional Title					
Mailing Address of Nominee					
City		State		Zip Code	

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name					
Head Start or Early Head Start Director					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Membership Information

Category	Membership #
National Head Start Association	
Region IV Head Start Association	
Your State Head Start Association	

Submission Checklist

- ☐ Nominee must be an individual or organization that made an innovative contribution of time and effort that has had a positive impact upon children, families, and/or communities.
- ☐ Submit two letters of reference from two organizational leaders who know the impact of the service to the community.
- ☐ Submit a response to the following, in its entirety:
 - ☐ A statement describing key demographic information and history of the local community
 - ☐ A brief description of the specific contribution(s) being nominated, the approach and name(s) of key leaders of the effort.
 - ☐ Please provide a brief description of the outcomes or impact of the effort on vulnerable children and families that are unique and/or go beyond Head Start's performance standards.

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NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION

Aubrey Puckett Memorial Award

Regionally known as the Dr. Arvern Moore Memorial Award

NHSA Description

National staff award in memory of Aubrey Puckett – this award celebrates a Head Start alum (parent or child) now working for a Head Start or Early Head Start program who demonstrates their passion for serving through advocacy, career growth, and being actively involved in their program, community, or the state/national level to benefit Head Start families.

Regionally known as the Dr. Arvern Moore Memorial Award: For more than 40 years, Dr. Arvern Moore gave distinguished service as an advocate, officer and board member for numerous local, state, regional and national organizations that are committed to improving the lives of children and families. During his tenure as Executive Director at the Institute of Community Services, Inc., the organization expanded its scope of services, increased funding levels, and enriched the lives of thousands of Head Start children and their families within the community. Dr. Moore was a charter member and past President of the Region IV Head Start Association who also served multiple terms as President of the National Head Start Association. RIVHSA acknowledges his contribution to the development and growth of the organization as well as his legacy of leadership which advanced the many other organizations he served to achieve distinction as powerful advocates for children and families.

RIVHSA will present the recipient with a commemorative plaque and \$100 award.

NHSA Award-Specific Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. The nominee must have been enrolled in a Head Start/Early Head Start program as a child or parent for one or more years.
2. The nominee must have been a Head Start program employee for at least three years.
3. Submit two letter of reference from each of two people who know the nominee in his/her current role.
4. The nominee must provide a personal statement addressing the following requirements, in its entirety:
 - a. Key details about the nominee and the nominee's family, and connection to Head Start as a Head Start child or parent.
 - b. Provide the length of service in a Head Start program, including year started, positions held.
 - c. Describe activities and efforts the nominee has made that demonstrate passion for serving through advocacy career growth, and being involved in Head Start, the community, or the state/national level to benefit Head Start families.

NHSA General Rules and Regulations:

1. All scholarship and award applications must reflect services contributed during the calendar year 2018.
2. Applicant must be associated with a program that is a current member of NHSA.
3. Applicant must be associated with a program that is a current member of RIVHSA and its state association.
4. An individual may not be nominated for more than one scholarship or award per year.
5. Local member programs may not nominate more than one person or program.
6. Individuals selected for an award or scholarship must be able to provide a Social Security number and other required information to redeem cash awards.
7. Applicant must be willing to allow NHSA to publicize their nomination through a variety of media channels including publications, social media, and websites.
8. Nominees will be contacted primarily by e-mail.
9. NHSA scholarship and award winners serve as models and ambassadors for the Head Start Community. During their year, winners will be encouraged to share successful strategies with others during NHSA conferences, institutes and gatherings.
10. NHSA board members, staff, and family members are ineligible.

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NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION

Aubrey Puckett Memorial Award

Regionally known as the Dr. Arvern Moore Memorial Award

Be sure to complete the form below in its entirety. All fields are required. Please type or print clearly.

Nominee

Nominee		Social Security #		Date	
Professional Title					
Mailing Address of Nominee					
City		State		Zip Code	

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name					
Head Start or Early Head Start Director					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Membership Information

Category	Membership #
National Head Start Association	
Region IV Head Start Association	
Your State Head Start Association	

Submission Checklist

- ☐ The nominee must have been enrolled in a Head Start/Early Head Start program as a child or parent for one or more years.
- ☐ The nominee must have been a Head Start program employee for at least three years.
- ☐ Submit two letter of reference from each of two people who know the nominee in his/her current role.
- ☐ The nominee must provide a personal statement addressing the following requirements, in its entirety:
 - ☐ Key details about the nominee and the nominee's family, and connection to Head Start as a Head Start child or parent.
 - ☐ Provide the length of service in a Head Start program, including year started, positions held.
 - ☐ Describe activities and efforts the nominee has made that demonstrate passion for serving through advocacy career growth, and being involved in Head Start, the community, or the state/national level to benefit Head Start families.

NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION Vanessa Rich Leadership Award

NHSA Description

This award is intended for a new director of Head Start or Early Head Start (3 years or less) who is carrying on Vanessa Rich's legacy of "Head Start doesn't stop on the front porch, it comes all the way into the house". This individual will earn a complimentary registration and travel stipend for either NHSA's Fall or Winter Leadership Institute where they will speak at the Head Start Spirit Rally or Congressional Breakfast to share how they are carrying on Vanessa's legacy in the Head Start Community.

RIVHSA will present the recipient with a commemorative plaque and \$100 award.

NHSA Award-Specific Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. The nominee must be a Head Start or Early Head Start Director for three years or less.
2. The nominee must provide a personal statement addressing the following requirements about how they are carrying out Vanessa Rich's legacy
3. Submit two letters of recommendation which support the personal statement.

NHSA General Rules and Regulations:

1. All scholarship and award applications must reflect services contributed during the calendar year 2018.
2. Applicant must be associated with a program that is a current member of NHSA.
3. Applicant must be associated with a program that is a current member of RIVHSA and its state association.
4. An individual may not be nominated for more than one scholarship or award per year.
5. Local member programs may not nominate more than one person or program.
6. Individuals selected for an award or scholarship must be able to provide a Social Security number and other required information to redeem cash awards.
7. Applicant must be willing to allow NHSA to publicize their nomination through a variety of media channels including publications, social media, and websites.
8. Nominees will be contacted primarily by e-mail.
9. NHSA scholarship and award winners serve as models and ambassadors for the Head Start Community. During their year, winners will be encouraged to share successful strategies with others during NHSA conferences, institutes and gatherings.
10. NHSA board members, staff, and family members are ineligible.

Celebrating Head Start Heroes

NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION Vanessa Rich Leadership Award

Be sure to complete the form below in its entirety. All fields are required. Please type or print clearly.

Nominee

Nominee		Social Security #		Date	
Professional Title					
Mailing Address of Nominee					
City		State		Zip Code	

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name					
Head Start or Early Head Start Director					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Membership Information

Category	Membership #
National Head Start Association	
Region IV Head Start Association	
Your State Head Start Association	

Submission Checklist

- ☐ The nominee must have a child enrolled in a Head Start/Early Head Start program.
- ☐ The nominee must be a High School graduate, be pursuing a post-secondary education or submit proof of acceptance or enrollment in an institution of higher learning.
- ☐ Submit two letters of reference from people who know the nominee as a student and as a parent in the Head Start/Early Head Start program.
- ☐ The nominee must provide a personal statement addressing the following, in its entirety:
 - ☐ Details about the nominee, the nominee's family, and connection to Head Start/Early Head Start.
 - ☐ Activities and mobilizing efforts contributed by the nominee that affected change in their local Head Start program or community. Describe what "real change" was affected by their contribution.
 - ☐ Personal education and professional goals no more than 200 words in length.

NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION Ron Herndon Head Start Parent Scholarship

NHSA Description

This scholarship honors Ron Herndon's tireless efforts championing Head Start parents. The Ron Herndon scholarship celebrates Head Start parents who, through their own efforts to mobilize other parents and community members, have affected real change in their Head Start programs and/or communities. Nominee must be attending an institution whose accreditation is recognized by the US Department of Education. Funds may be applied to the documented cost of tuition or books. NHSA will present the recipient a one-time scholarship award and a commemorative certificate from NHSA.

RIVHSA will present the recipient with a commemorative plaque and one-time \$500 award.

NHSA Award-Specific Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. The nominee must have a child enrolled in a Head Start/Early Head Start program.
2. The nominee must be a High School graduate, be pursuing a post-secondary education or submit proof of acceptance or enrollment in an institution of higher learning.
3. Submit two letters of reference from people who know the nominee as a student and as a parent in the Head Start/Early Head Start program.
4. The nominee must provide a personal statement addressing the following, in its entirety:
 - a. Details about the nominee, the nominee's family, and connection to Head Start/Early Head Start.
 - b. Activities and mobilizing efforts contributed by the nominee that affected change in their local Head Start program or community. Describe what "real change" was affected by their contribution.
 - c. Personal education and professional goals no more than 200 words in length.

NHSA General Rules and Regulations:

1. All scholarship and award applications must reflect services contributed during the calendar year 2018.
2. Applicant must be associated with a program that is a current member of NHSA.
3. Applicant must be associated with a program that is a current member of RIVHSA and its state association.
4. An individual may not be nominated for more than one scholarship or award per year.
5. Local member programs may not nominate more than one person or program.
6. Individuals selected for an award or scholarship must be able to provide a Social Security number and other required information to redeem cash awards.
7. Applicant must be willing to allow NHSA to publicize their nomination through a variety of media channels including publications, social media, and websites.
8. Nominees will be contacted primarily by e-mail.
9. NHSA scholarship and award winners serve as models and ambassadors for the Head Start Community. During their year, winners will be encouraged to share successful strategies with others during NHSA conferences, institutes and gatherings.
10. NHSA board members, staff, and family members are ineligible.

Celebrating Head Start Heroes

NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION Ron Herndon Head Start Parent Scholarship

Be sure to complete the form below in its entirety. All fields are required. Please type or print clearly.

Nominee

Nominee		Social Security #		Date	
Professional Title					
Mailing Address of Nominee					
City		State		Zip Code	

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name					
Head Start or Early Head Start Director					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Membership Information

Category	Membership #
National Head Start Association	
Region IV Head Start Association	
Your State Head Start Association	

Submission Checklist

- ☐ The nominee must have a child enrolled in a Head Start/Early Head Start program.
- ☐ The nominee must be a High School graduate, be pursuing a post-secondary education or submit proof of acceptance or enrollment in an institution of higher learning.
- ☐ Submit two letters of reference from people who know the nominee as a student and as a parent in the Head Start/Early Head Start program.
- ☐ The nominee must provide a personal statement addressing the following, in its entirety:
 - ☐ Details about the nominee, the nominee's family, and connection to Head Start/Early Head Start.
 - ☐ Activities and mobilizing efforts contributed by the nominee that affected change in their local Head Start program or community. Describe what "real change" was affected by their contribution.
 - ☐ Personal education and professional goals no more than 200 words in length.

Administrator of the Year Award

Description

This award acknowledges the important contributions of forward-thinking administrators to the long-term success of Head Start/Early Head Start programs and, ultimately, the children and families they serve. The award recipient will receive a commemorative plaque and \$100 award.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Applicant must serve in a position directly related to this year's emphasis area.
2. The application must only describe the applicant's responsibilities in their current professional role.
3. The local program must be a current member of RIVHSA.
4. Applicant must be a current member of RIVHSA.
5. Applicant must be a program employee for at one year with the nominating program.
6. Applicant must possess at least a bachelor's degree and submit proof of credentials.
7. Three (3) letters of reference must be included with the application.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered.
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Questionnaire (90 points)

On a separate sheet, respond to the following. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (10 points) Length or service in the program: What year did you start? What positions have you held?
2. (15 points) Training, qualifications, and credentials: At what level did you begin? What training appropriate to your position have you acquired? What credentials do you possess?
3. (15 points) Mobilization of resources and collaboration: List activities or projects in which you are (or have been) involved that demonstrate your ability to mobilize necessary resources to provide and enhance services to children and their families. Please include the size of your program.
4. (20 points) Quality and provision of services: Describe activities in your program or community that are unique and meet or surpass the Head Start Program Performance Standards.
5. (30 points) Describe in 500 words or less (no more than two typewritten, double spaced pages) any special contributions you have made to the program that have had a positive impact on services on the total program. Please be very specific.

Letters of Reference (10 points)

Include three letters of reference. Each letter must be from different individuals who know you in the following capacities: supervisor, personally, or as a volunteer or community member. Judges will rate the overall effectiveness of the letters. Applications not including all three letters will not be considered.

Celebrating Head Start Heroes

Administrator of the Year Award

Be sure to complete the form below in its entirety.

All fields are required. Please type or print clearly.

Please mark the year of application:

- () 2019 – Head Start and/or Early Head Start Director
() 2020 - Grantee Executive Director
() 2021 - Head Start and/or Early Head Start Center Director

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.

_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name					
Telephone		Fax			
E-mail					

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | | |
|--------|----------------------|--|
| Step 1 | Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Step 2 | Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 | State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 | Regional Association | Assemble a panel to review state applications and select regional recipient(s) |

Teacher of the Year Award

Description

This award recognizes exemplary teachers who have strong long-range potential for leadership and the ability to inspire a love of learning in young children. This honor was established to elevate the status of the teaching profession at the state and regional levels by creating opportunities for recognizing the most accomplished members of the profession. The award recipient will receive a commemorative plaque and \$100 award.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Applicant must serve in a position directly related to this year's emphasis area.
2. The application must only describe the applicant's responsibilities in their current professional role.
3. The local program must be a current member of RIVHSA.
4. Applicant must be a current member of RIVHSA.
5. Applicant must be a program employee for at one year with the nominating program.
6. Applicant must possess at least an Associate's degree and submit proof of credentials.
7. Three (3) letters of reference must be included with the application.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered.
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Questionnaire (90 points)

On a separate sheet, respond to the following. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (10 points) Length or service in the program: What year did you start? What positions have you held?
2. (15 points) Training, qualifications, and credentials: At what level did you begin? What training appropriate to your position have you acquired? What credentials do you possess?
3. (15 points) Mobilization of resources and collaboration: List activities or projects in which you are (or have been) involved that demonstrate your ability to mobilize necessary resources to provide and enhance services to children and their families. Please include the size of your program.
4. (20 points) Quality and provision of services: Describe activities in your program or community that are unique and meet or surpass the Head Start Program Performance Standards.
5. (30 points) Describe in 500 words or less (no more than two typewritten, double spaced pages) any special contributions you have made to the program that have had a positive impact on services on the total program. Please be very specific.

Letters of Reference (10 points)

Include three letters of reference. Each letter must be from different individuals who know you in the following capacities: supervisor, personally, or as a volunteer or community member. Judges will rate the overall effectiveness of the letters. Applications not including all three letters will not be considered.

Celebrating Head Start Heroes

Teacher of the Year Award

Be sure to complete the form below in its entirety.
All fields are required. Please type or print clearly.

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.

_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name			
Telephone		Fax	
E-mail			

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | | |
|--------|----------------------|--|
| Step 1 | Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Step 2 | Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 | State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 | Regional Association | Assemble a panel to review state applications and select regional recipient(s) |

Staff of the Year Award

Description

This award recognizes the significant contributions and extraordinary dedication of professional staff in the fulfillment of the organization's mission and established goals. The award recipient will receive a commemorative plaque and a \$100 award.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Applicant must serve in a position directly related to this year's emphasis area.
2. The application must only describe the applicant's responsibilities in their current professional role.
3. The local program must be a current member of RIVHSA.
4. Applicant must be a current member of RIVHSA.
5. Applicant must be a program employee for at one year with the nominating program.
6. Applicant must possess at least an Associate's degree and submit proof of credentials.
7. Three (3) letters of reference must be included with the application.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered.
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Questionnaire (90 points)

On a separate sheet, respond to the following. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (10 points) Length or service in the program: What year did you start? What positions have you held?
2. (15 points) Training, qualifications, and credentials: At what level did you begin? What training appropriate to your position have you acquired? What credentials do you possess?
3. (15 points) Mobilization of resources and collaboration: List activities or projects in which you are (or have been) involved that demonstrate your ability to mobilize necessary resources to provide and enhance services to children and their families. Please include the size of your program.
4. (20 points) Quality and provision of services: Describe activities in your program or community that are unique and meet or surpass the Head Start Program Performance Standards.
5. (30 points) Describe in 500 words or less (no more than two typewritten, double spaced pages) any special contributions you have made to the program that have had a positive impact on services on the total program. Please be very specific.

Letters of Reference (10 points)

Include three letters of reference. Each letter must be from different individuals who know you in the following capacities: supervisor, personally, or as a volunteer or community member. Judges will rate the overall effectiveness of the letters. Applications not including all three letters will not be considered.

Celebrating Head Start Heroes

Staff of the Year Award

Be sure to complete the form below in its entirety.
All fields are required. Please type or print clearly.

Please mark the year of application:

- () 2019 - Early Childhood Development/Health: Transition Emphasis
() 2020 - Family Services
() 2021 - Early Childhood Development/Health: Nutrition Emphasis

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.
_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name			
Telephone		Fax	
E-mail			

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | | |
|--------|----------------------|--|
| Step 1 | Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Step 2 | Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 | State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 | Regional Association | Assemble a panel to review state applications and select regional recipient(s) |

Support Staff of the Year Award

Description

This award recognizes the significant contributions and extraordinary dedication of support staff in the fulfillment of the organization's mission and established goals. The award recipient will receive a commemorative plaque and \$100 award.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Applicant must serve in a position directly related to this year's emphasis area.
2. The application must only describe the applicant's responsibilities in their current professional role.
3. The local program must be a current member of RIVHSA.
4. Applicant must be a current member of RIVHSA.
5. Applicant must be a program employee for at one year with the nominating program.
6. Applicant must possess at least an Associate's degree and submit proof of credentials.
7. Three (3) letters of reference must be included with the application.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered.
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Questionnaire (90 points)

On a separate sheet, respond to the following. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (10 points) Length of service in the program: What year did you start? What positions have you held?
2. (15 points) Training, qualifications, and credentials: At what level did you begin? What training appropriate to your position have you acquired? What credentials do you possess?
3. (15 points) Mobilization of resources and collaboration: List activities or projects in which you are (or have been) involved that demonstrate your ability to mobilize necessary resources to provide and enhance services to children and their families. Please include the size of your program.
4. (20 points) Quality and provision of services: Describe activities in your program or community that are unique and meet or surpass the Head Start Program Performance Standards.
5. (30 points) Describe in 500 words or less (no more than two typewritten, double spaced pages) any special contributions you have made to the program that have had a positive impact on services on the total program. Please be very specific.

Letters of Reference (10 points)

Include three letters of reference. Each letter must be from different individuals who know you in the following capacities: supervisor, personally, or as a volunteer or community member. Judges will rate the overall effectiveness of the letters. Applications not including all three letters will not be considered.

Celebrating Head Start Heroes

Support Staff of the Year Award

Be sure to complete the form below in its entirety.
All fields are required. Please type or print clearly.

Please mark the year of application:

- () 2019 - Technology Services
() 2020 - Nutrition Services
() 2021 - Transportation Services

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.
_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name					
Telephone		Fax			
E-mail					

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | |
|-----------------------------|--|
| Step 1 Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Step 2 Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 Regional Association | Assemble a panel to review state applications and select regional recipient(s) |

Achievement Award

DISABILITY SERVICES COORDINATOR

Description

This award recognizes exceptional performance in the delivery of services to children with disabilities and supporting parents in their role as advocates for their children. The award recipient will receive a commemorative plaque and \$100 award.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Applicant must be a Head Start/Early Head Start Coordinator of Disability Services or in a combined position responsible for disability services.
2. The local program must be a current member of RIVHSA.
3. Applicant must be a current member of RIVHSA.
4. Applicant must be a program employee for at one year with the nominating program.
5. Applicant must have credentials beyond a high school diploma.
6. Three (3) letters of reference must be included with the application.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered.
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Questionnaire (90 points)

On a separate sheet, please type your answers to the following question. The maximum point value for each question is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (10 points) Length of service in program: What year did you start? What positions have you held, and so on?
2. (15 points) Training, qualifications, and credentials: At what level did you begin? What training appropriate to your position have you acquired? What credentials do you possess, and so on?
3. (15 points) Mobilization of resources and collaboration: List activities or projects in which you are (or have been) involved that demonstrate your ability to mobilize necessary resources to provide and enhance services to children and their families. Please include the size of your program.
4. (20 points) Quality and provision of services: Describe activities in your program or community that are unique and meet or surpass the Head Start Program Performance Standards.
5. (30 points) Describe in 300 words or less (no more than one typewritten, double spaced page) any special contribution you have made to the program that have had a positive impact on services to the local program. Please be very specific.

Letters of Reference (10 points)

Include three letters of reference. Each letter must be from different individuals who know you in the following capacities: supervisor, personally, or as a volunteer or community member. Judges will rate the overall effectiveness of the letters. Applications not including all three letters will not be considered.

Celebrating Head Start Heroes

Achievement Award DISABILITY SERVICES COORDINATOR

Be sure to complete the form below in its entirety.
All fields are required. Please type or print clearly.

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.

_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name			
Telephone		Fax	
E-mail			

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | | |
|--------|----------------------|--|
| Step 1 | Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Step 2 | Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 | State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 | Regional Association | Assemble a panel to review state applications and select regional recipient(s) |

Oral Health Award

Description

This award recognizes exceptional leadership and commitment toward improving the oral health of children and their families. The award recipient will receive a commemorative plaque and \$250 grant award to support oral health activities at their local program.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Applicant must be a Head Start/Early Head Start program that sufficiently outlines how this award will be used to promote oral health practices in the classroom, including parent involvement and utilization of Colgate's Bright Smiles, Bright Futures program.
2. The local program must be a current member of RIVHSA.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered.
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Questionnaire (100 points)

On a separate sheet, please type your answers to the following question. The maximum point value for each question is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (20 points) Need: Describe the current oral health activities in your local programs, the size of your program, and discuss the need to enhance your present efforts.
2. (30 points) Activities: Describe what activities you plan to implement with the help of this award and the benefit students will receive from these activities.
3. (10 points) Bright Smiles, Bright Futures: Discuss how the Bright Smiles, Bright Futures program will be utilized as part of your programming efforts.
4. (20 points) Parent Involvement: Describe how parents will be involved in oral health activities and the benefits they will receive from changes to the program's oral health practices.
5. (20 points) Program goals: Outline your program's short-term and long-term goals as they pertain to oral health practices in your program.

Celebrating Head Start Heroes

Oral Health Award

Be sure to complete the form below in its entirety.
All fields are required. Please type or print clearly.

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.

_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name			
Telephone		Fax	
E-mail			

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | | |
|--------|----------------------|--|
| Step 1 | Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Step 2 | Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 | State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 | Regional Association | Assemble a panel to review state applications and select regional recipient(s) |

Beating the Odds Award

Description

This award recognizes a Head Start/Early Head Start parent who has overcome significant challenges on the journey to self-sufficiency. The award recipient will receive a commemorative plaque and \$100 award.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Applicant must be a Head Start/Early Head Start parent and not a paid employee during the school year specified above.
2. Applicant must have volunteered in the Head Start/Early Head Start program.
3. The local program must be a current member of RIVHSA.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered. .
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Questionnaire (90 points)

On a separate sheet, please type your answers to the following question. The maximum point value for each question is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (10 points) List any positions held by the individual (i.e. center committee, policy council) and the number of volunteer hours contributed in the 2012-13 program year.
2. (30 points) Self-sufficiency: Describe how the individual has overcome obstacles, persevered through hardships, and taken steps toward self-sufficiency.
3. (30 points) Career advancement: Describe the steps the individual has taken or participation in programs that has led toward career advancement.
4. (30 points) Statement of goals: Describe in 300 words or less (no more than one typewritten, double-spaced page) the individual's goals/aspirations for their career, education and future.

Celebrating Head Start Heroes

Beating the Odds Award

Be sure to complete the form below in its entirety.
All fields are required. Please type or print clearly.

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.

_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name			
Telephone		Fax	
E-mail			

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | | |
|--------|----------------------|--|
| Step 1 | Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Step 2 | Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 | State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 | Regional Association | Assemble a panel to review state applications and select regional recipient(s) |

Parent of the Year Award

Description

This award honors a Head Start/Early Head Start father who has demonstrated the ability to serve as a role model for his children and to make a positive difference in the community. The award recipient will receive a commemorative plaque and \$100 award.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Applicant must be a Head Start/Early Head Start parent and not a paid employee during the school year specified above.
2. Applicant must have volunteered in the Head Start/Early Head Start program.
3. The local program must be a current member of RIVHSA.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered.
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Questionnaire (90 points)

On a separate sheet, please type your answers to the following question. The maximum point value for each question is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (10 points) List any positions held by the individual (i.e. center committee, policy council) and the number of volunteer hours contributed in the 2012-13 program year.
2. (30 points) Self-sufficiency: Describe how the individual has overcome obstacles, persevered through hardships, and taken steps toward self-sufficiency.
3. (30 points) Career advancement: Describe the steps the individual has taken or participation in programs that has led toward career advancement.
4. (30 points) Statement of goals: Describe in 300 words or less (no more than one typewritten, double-spaced page) the individual's goals/aspirations for their career, education and future.

Celebrating Head Start Heroes

Parent of the Year Award

Be sure to complete the form below in its entirety.
All fields are required. Please type or print clearly.

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.

_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name			
Telephone		Fax	
E-mail			

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | | |
|--------|----------------------|--|
| Step 1 | Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Step 2 | Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 | State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 | Regional Association | Assemble a panel to review state applications and select regional recipient(s) |

Father of the Year Award

Description

This award honors a Head Start/Early Head Start father who has demonstrated the ability to serve as a role model for his children and to make a positive difference in the community. The award recipient will receive a commemorative plaque and \$100 award.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Nominee must be the father of a child or children in Head Start/Early Head Start during the school year specified above. The Program Performance Standards 1305.2(2) definition of a father will be adhered to.
2. Nominee must model increased educational involvement and personal responsibility in the lives of his own children as well as improved personal development resulting from his Head Start/Early Head Start experience.
3. The local program must be a current member of RIVHSA.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered.
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Questionnaire (90 points)

On a separate sheet, please type your answers to the following question. The maximum point value for each question is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (20 points) Volunteering: Describe the ways the individual has volunteered or worked in the program.
2. (20 points) Participation: Describe the program activities he participated in with his child or children.
3. (30 points) Development: Describe how the fatherhood program has helped him develop.
4. (20 points) Personal statement: Describe in 300 words or less (no more than one typewritten, double space page) why he should be selected as the Father of the Year. Please be very specific.

Letters of Reference (10 points)

Include three letters of reference.

1. Two letters must be from people who know the individual as a program volunteer, employee and/or fatherhood program participant.
2. The third letter may be personal.

Judges will rate the overall effectiveness of the letters. Applications not including all three letters will not be considered.

Celebrating Head Start Heroes

Father of the Year Award

Be sure to complete the form below in its entirety.
All fields are required. Please type or print clearly.

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.

_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name					
Telephone		Fax			
E-mail					

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | | |
|--------|----------------------|--|
| Step 1 | Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Step 2 | Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 | State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 | Regional Association | Assemble a panel to review state applications and select regional recipient(s) |

Humanitarian of the Year Award

Description

This award was established to recognize an individual who utilizes their resources and leadership to help Head Start/Early Head Start children and their families, and achieve positive outcomes in their community. The award recipient will receive a commemorative plaque and \$100 award.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Nominee must be an individual or organization that made a voluntary contribution of time and effort, without regard to religious or ethnic affiliation, that has had a positive impact upon children, families and/or communities.
2. The local program must be a current member of RIVHSA.
3. The contribution must have occurred within, or in preparation for the school year specified above.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered.
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Questionnaire (100 points)

On a separate sheet, please type your answers to the following question. The maximum point value for each question is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (20 points) Need: Describe the situation before the contribution was made.
2. (30 points) Activity: Describe the nominee's activity that met this need, include length of time this person has been involved in this activity and the scope of volunteer services provided.
3. (30 points) Results: Describe the positive results of the nominee's activities, who benefited, and how.
4. (10 points) Enhancement: Support this nomination with letters from interested individuals or organizations. If available, include news reports or other documentation about the contribution.
5. (5 points) Biographical sketch: Describe family, education, hobbies, interests, employment, and anything else you feel is appropriate and that give a broad picture of the nominee, but especially those items relevant to the award. This should be more than 300 words (one typewritten, double spaced page)
6. (5 points) Vantage: Briefly describe the vantage point from which you observed the nominee's contribution. This should be no more than 300 words (on typewritten, double spaced page)

Celebrating Head Start Heroes

Humanitarian of the Year Award

Be sure to complete the form below in its entirety.
All fields are required. Please type or print clearly.

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.

_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name			
Telephone		Fax	
E-mail			

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | | |
|--------|----------------------|--|
| Step 1 | Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Sept 2 | Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 | State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 | Regional Association | Assemble a panel to review state applications and select regional recipient(s) |

Corporate Award

Description

This award was established to recognize a corporation that utilizes their resources and leadership to help Head Start/Early Head Start children and their families, and promote positive outcomes in their community. The award recipient will receive a commemorative plaque.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Nominee must be a corporation that demonstrates commitment to the goals and objectives of Head Start/Early Head Start and/or promote special projects that benefit poor children and their families.
2. The local program must be a current member of RIVHSA.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered.
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Essay (100 points)

On a separate sheet, respond to the following. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (100 points) Special contributions: Describe in 300 words or less (no more than one typewritten, double spaced page) the special contribution(s) this company makes that impacts the program, children and families. Be sure to describe how this company's contributions help fulfill the goals and objectives of the program as outlined below.

About Head Start and Early Head Start

Established in 1965, Head Start is a national program that provides comprehensive child development services to economically disadvantaged children and families, with a special focus on helping preschoolers develop the early reading and math skills they need to be successful in school. Head Start promotes school readiness by enhancing the social and cognitive development of children through the provision of educational, health, nutritional, social and other services to enrolled children and families.

In FY 1995, the Early Head Start (EHS) program was established to serve children from birth to three years of age in recognition of the mounting evidence that the earliest years matter a great deal to children's growth and development. EHS promotes healthy prenatal outcomes, enhances the development of infants and toddlers, and promotes healthy family functioning. Its mission is to promote healthy prenatal outcomes for pregnant women, enhance the development of very young children, and to promote healthy family functioning.

Celebrating Head Start Heroes

Corporate Award

Be sure to complete the form below in its entirety.
All fields are required. Please type or print clearly.

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.

_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name			
Telephone		Fax	
E-mail			

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | | |
|--------|----------------------|--|
| Step 1 | Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Step 2 | Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 | State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 | Regional Association | Assemble a panel to review state applications and select regional recipient(s) |

Scholarship for the Hearing Impaired

Description

This scholarship is designed to recognize a hearing impaired individual who is making significant contributions to their community and to encourage their continuing education at an institution of higher learning. The scholarship recipient will receive a commemorative plaque and is eligible to receive a one-time scholarship award of \$500 towards the attainment of an undergraduate degree at an institution of higher learning. The recipient must send RIVHSA proof of eligibility (acceptance or enrollment at an institution of higher learning, class schedule and 2.5 cumulative GPA) to receive the scholarship award. A runner-up is selected in the event that the recipient is determined ineligible or fails to comply with verification guidelines.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Applicant must be a hearing impaired student.
2. The local program must be a current member of RIVHSA.
3. Applicant must prove acceptance or enrollment in an institution of higher learning.
4. Three (3) letters of reference must be included with the application.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered.
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Questionnaire (70 points)

On a separate sheet, please type your answers to the following two questions. The maximum point value for each question is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (30 points) Statement of financial need: Describe how this scholarship will enable you to be successful in your chosen degree program.
2. (40 points) Statement of goals: Describe in 300 words or less (no more than one typewritten, double spaced page) the goals/aspirations you have for furthering your education and the role Head Start/Early Head Start has played in your education.

Letters of Reference (30 points)

Include three letters of reference from people who can verify the student's work, volunteer service, and other activities. Letters will be judged by specific information and should be no more than one typewritten page. Judges will rate the overall effectiveness of the letters. Applications that do not include all three references will not be considered for this award.

Celebrating Head Start Heroes

Scholarship for the Hearing Impaired

Be sure to complete the form below in its entirety.
All fields are required. Please type or print clearly.

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.

_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name			
Telephone		Fax	
E-mail			

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | | |
|--------|----------------------|--|
| Step 1 | Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Step 2 | Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 | State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 | Regional Association | Assemble a panel to review state applications and select regional recipient(s) |

Scholarship for Head Start/Early Head Start Staff, Higher Education

Description

This scholarship is designed to recognize a Head Start/Early Head Start staff person who is making significant contributions to their local program and community and to encourage their continuing education at an institution of higher learning. The scholarship recipient will receive a commemorative plaque and is eligible to receive a one-time scholarship award of \$1000 towards the attainment of an undergraduate degree at an institution of higher learning. The recipient must send RIVHSA proof of eligibility (acceptance or enrollment at an institution of higher learning, class schedule and 2.5 cumulative GPA) to receive the scholarship award. A runner-up is selected in the event that the recipient is determined ineligible or fails to comply with verification guidelines.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Applicant must be a current employee of a Head Start/Early Head Start grantee.
2. The local program must be a current member of RIVHSA.
3. Applicant must prove acceptance or enrollment in an institution of higher learning.
4. Three (3) letters of reference must be included with the application.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered.
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Questionnaire (70 points)

On a separate sheet, please type your answers to the following two questions. The maximum point value for each question is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (30 points) Financial need: Include a brief statement of the need for financial assistance.
2. (40 points) Professional Development Goals: Write a statement of professional development goals in 300 words or less (no more than one double spaced, typed page) for furthering your education and how degree attainment will advance the priorities and initiatives at your local Head Start/Early Head Start program.

Letters of Reference (30 points)

Include three letters of reference from people who can verify the nominee's work, volunteer service, and other activities. Letters will be judged on specific information and should be no longer than one typewritten page. Judges will rate the overall effectiveness of the letters. Applications that do not include all three references will not be considered for this award.

Scholarship for Head Start/Early Head Start Staff, Higher Education

Be sure to complete the form below in its entirety.
All fields are required. Please type or print clearly.

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.

_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name					
Telephone		Fax			
E-mail					

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | |
|-----------------------------|--|
| Step 1 Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Step 2 Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 Regional Association | Assemble a panel to review state applications and select regional recipient(s) |

Scholarship for Head Start Alumni, High School Senior

Description

This scholarship is designed to recognize a Head Start graduate who is making significant contributions to their community and to encourage their continuing education at an institution of higher learning. Two recipients are selected for this scholarship. The scholarship recipient will receive a commemorative plaque and is eligible to receive a one-time scholarship award of \$1500 to be applied to an institution of higher learning for the attainment of an undergraduate degree. The recipient must send RIVHSA proof of eligibility (acceptance or enrollment at an institution of higher learning, class schedule and 2.5 cumulative GPA) to receive the scholarship award. A runner-up is selected in the event that the recipient is determined ineligible or fails to comply with verification guidelines.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Applicant must be a former student and graduate of Head Start.
2. The local program must be a current member of RIVHSA.
3. Applicant must prove acceptance or enrollment in an institution of higher learning.
4. Three (3) letters of reference must be included with the application.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered.
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Questionnaire (70 points)

On a separate sheet, please type your answers to the following two questions. The maximum point value for each question is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (30 points) Financial need: Include a brief statement of the need for financial assistance.
2. (40 points) Personal statement: Discuss in 300 words or less (no more than one double spaced, typed page) your goals and an aspiration for furthering your education and the role Head Start/Early Head Start has played in your education. Include the years that you attended Head Start/Early Head Start.

Letters of Reference (30 points)

Include three letters of reference from people who can verify the nominee's work, volunteer service, and other activities. Letters will be judged on specific information and should be no longer than one typewritten page. Judges will rate the overall effectiveness of the letters. Applications that do not include all three references will not be considered for this award.

Scholarship for Head Start Alumni, High School Senior

Be sure to complete the form below in its entirety.
All fields are required. Please type or print clearly.

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.

_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name					
Telephone		Fax			
E-mail					

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | |
|-----------------------------|--|
| Step 1 Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Step 2 Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 Regional Association | Assemble a panel to review state applications and select regional recipient(s) |

Scholarship for Head Start/Early Head Start Parent, Post-Secondary Education

Description

This scholarship is designed to recognize a Head Start/Early Head Start parent who is making significant contributions to their community and to encourage their continuing education at an institution of higher learning. Two recipients are selected for this scholarship. The scholarship recipient will receive a commemorative plaque and is eligible to receive a one-time scholarship award of \$500 towards the attainment of an undergraduate degree at an institution of higher learning. The recipient must send RIVHSA proof of eligibility (acceptance or enrollment at an institution of higher learning, class schedule and 2.5 cumulative GPA) to receive the scholarship award. A runner-up is selected in the event that the recipient is determined ineligible or fails to comply with verification guidelines.

Criteria

All award applications must reflect services contributed during the current program/school year as of June 30. **This application is due to RIVHSA by August 15. Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.** See complete guidelines on pages 1-4.

1. Applicant must be a Head Start/Early Head Start parent and not a paid employee during the current program/school year as of August 15.
2. Applicant must have volunteered in the Head Start/Early Head Start program.
3. The local program must be a current member of RIVHSA.
4. Applicant must prove acceptance or enrollment in an institution of higher learning.
5. Three (3) letters of reference must be included with the application.

Application Guidelines

- All questions must be answered in their entirety. Applications submitted on incorrect forms will not be considered.
- Local programs are responsible for all expenses related to the application process.
- RIVHSA is not responsible for expenses related to the attendance of regional nominees or recipients at the annual awards gala.
- Once the award recipient is selected, the nominating Head Start/Early Head Start program must provide RIVHSA with a high-resolution digital picture (2x3) by January 5th for inclusion in the awards gala program. Send to fstarr@rivhsa.org.

Questionnaire (70 points)

On a separate sheet, please type your answers to the following two questions. The maximum point value for each question is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (30 points) Special contributions: Describe in 300 words or less (no more than one double spaced, typed page) accomplishments and activities related to the continuous personal and career development of the parent. Include any program positions held by the parent.
2. (40 points) Personal goals: Write a statement of personal goals no more than 200 words in length.

Letters of Reference (30 points)

Include three letters of reference from people who can verify the nominee's work, volunteer service, and other activities. Letters will be judged on specific information and should be no longer than one typewritten page. Judges will rate the overall effectiveness of the letters. Applications that do not include all three references will not be considered for this award.

Scholarship for Head Start/Early Head Start Parent, Post-Secondary Education

Be sure to complete the form below in its entirety.
All fields are required. Please type or print clearly.

For Administrative Use Only:

_____ Local Program Director
initial here before submitting to the state association.

_____ State Association President
initial here before submitting to RIVHSA

Nominee

Nominee		Social Security #		Date	
State		Program Member #		Individual Member #	
Mailing Address of Nominee					
City		State		Zip Code	

Head Start/Early Head Start Director

Name					
Telephone		Fax			
E-mail					

Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

Submission Checklist

Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- ☐ Complete application form
- ☐ Questionnaire responses
- ☐ Three letters of reference

Application Process

- | | |
|-----------------------------|--|
| Step 1 Nominee | Submit all items listed above to your local Head Start/Early Head Start center |
| Step 2 Local Program | Select a panel to review local nominees, then submit winning applications to your state association (Complete process guidelines for local programs on page 2) |
| Step 3 State Association | Select a panel to review local nominees, then submit winning applications to the regional association (Complete process guidelines for state associations on page 2) |
| Step 4 Regional Association | Assemble a panel to review state applications and select regional recipient(s) |