

**Federal Teacher Preparation Regulations
Stakeholder Committee
Nomination Form**



Section A. Personal Information

Prefix (opt)	First Name	Middle Initial	Last Name
Mailing Address		Name of Current Employer	
Phone Number		E-mail	
Education	Ethnicity	Race	Gender

Section B. Representative Categories

Select the category or categories you represent and your number of years of experience.

<input type="checkbox"/> Leaders and faculty of traditional teacher preparation programs and alternative routes to State certification or licensure programs	
<input type="checkbox"/> Students of teacher preparation programs	
<input type="checkbox"/> Local education agency superintendents	
<input type="checkbox"/> Small teacher preparation programs (i.e., programs that produce fewer than a program size threshold of 25 recent graduates in a given year or any lower threshold set by a State)	
<input type="checkbox"/> Local school boards	
<input type="checkbox"/> Elementary through secondary school leaders and instructional staff	
<input type="checkbox"/> Elementary through secondary school students and their parents	
<input type="checkbox"/> Institutions of higher education that serve high proportions of low-income students, students of color, or English learners	
<input type="checkbox"/> English learners, students with disabilities, and other underserved students	
<input type="checkbox"/> Officials of the State's standards board or other appropriate standards body	
<input type="checkbox"/> Teacher preparation program provided through distance education	

Section C. Nominated By

First Name	Last Name		
Title/Institution	Phone Number	E-mail	