

**VCTM 2020 William C Lowry Mathematics Educator of the Year Nomination Form**

To: VCTM Members  
Virginia Principals  
Math Department Heads  
University Department Heads/Deans

From: Brenda P. Barrow  
VCTM William C. Lowry Mathematics Educator of the Year Committee  
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Each year the Virginia Council of Teachers of Mathematics may recognize a classroom teacher on the elementary, middle, secondary, university and math specialist/coach level for his/her outstanding work in the field of mathematics. One teacher selected from each of the five categories will be awarded the VCTM William C. Lowry Mathematics Educator of the Year Award. All awards will be announced in the spring of 2020. Past winners and current elected VCTM Board members are **not** eligible for nomination.

Nominees must have a minimum of five years teaching experience and be a current classroom teacher, work with students as a math resource teacher, or be a math specialist.

Nominations can be made by a sponsor or be self-nominated. After a nomination is accepted, details and information will be emailed to the nominee.

To make a nomination, complete the form below and mail or email to the address listed at the bottom of the form.

Nominations must be **postmarked no later than Oct. 2, 2019 or electronically submitted no later than Oct. 7, 2019.**

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**Nomination Form**  
**VCTM 2020 William C. Lowry**  
**Mathematics Educator of the Year Award**  
Nominee information – Please **PRINT or TYPE.**

Date: \_\_\_\_\_

Name of Nominee: \_\_\_\_\_

Home Address: \_\_\_\_\_ Email: \_\_\_\_\_  
\_\_\_\_\_, Va \_\_\_\_\_ Home phone: ( \_\_\_\_ ) \_\_\_\_\_

Nominee's Position and School: \_\_\_\_\_

Nomination Category: Elementary \_\_\_\_\_, Middle \_\_\_\_\_, High \_\_\_\_\_, University \_\_\_\_\_, Math Specialist \_\_\_\_\_

Nominee's School Address: \_\_\_\_\_  
\_\_\_\_\_, VA \_\_\_\_\_ School phone: ( \_\_\_\_ ) \_\_\_\_\_

**Sponsor Information - Please PRINT or TYPE.**

Name: \_\_\_\_\_ Position or Title: \_\_\_\_\_

School Division, College or University: \_\_\_\_\_

Business Address: \_\_\_\_\_ Email: \_\_\_\_\_  
\_\_\_\_\_, Va \_\_\_\_\_ Home phone: ( \_\_\_\_ ) \_\_\_\_\_

A letter of recommendation **DOES NOT** have to accompany the nomination. The nominee may ask that you submit a letter to him/her that can be included in the response packet with the other two letters of recommendation that he/she must submit.

Nominations must be **postmarked on or before October 2, 2019 or electronically submitted on or before October 7, 2019.**

Please mail to: Brenda P. Barrow 1311 E. Bayview Blvd. Norfolk, VA 23503

**Electronic nominations are welcome.** Send to: Brenda Barrow at this email address. [themathlady@cox.net](mailto:themathlady@cox.net)

**THANK YOU FOR MAKING THE NOMINATION!**