Jump Rope For Heart Recognition Awards

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Jump Rope For Heart Recognition Awards

Rules for Nomination/Application

1. Individuals who meet the outlined criteria may personally apply for the awards or be nominated by a colleague who is an AAHPERD member or AHA staff person (This person will be referred to as your sponsor).
2. Former winners of the award as well as current members of the Joint Projects Committee are not eligible.
3. Completed materials must be **typed** following the format for application and postmarked by **October 15, 2011**. Portfolios, folders/binders, and additional information are not required.

Procedure for Submitting the Application Forms

1. Send the blank nomination form to the nominee. Request that the form be completed and returned to the sponsor. Resumes and vitae will not be accepted.
2. Two letters of recommendation, with at least one from an AAHPERD member, must accompany the application.
3. The completed application form, letters of recommendation and supporting documentation must be postmarked to the Joint Projects office no later than October 15, 2011.
4. All nominations will be forwarded to the Awards Committee for review and final decision. The Awards Committee is comprised of several past award recipients and the current JPC chair or chair-elect.
5. Mail completed applications to:

AAHPERD
Joint Projects Office
1900 Association Drive
Reston, VA 20191

Jump Rope For Heart Recognition Awards Criteria

A Jump Rope For Heart Coordinator is defined for this purpose as an individual who has the major responsibility for organizing and conducting a Jump Rope For Heart Event for a specific school, organization, or school system.

A Demonstration Team Coach is defined for this purpose as an individual who has the major responsibility of teaching, training, and coaching a group of children who have presented workshops for the purpose of promoting the Jump Rope For Heart program. (**All applications must be typed**).

The nominated individual must be a person who:

1. Has a minimum of **five years** experience as an event coordinator, demonstration team coach, or state or district coordinator.
2. Serves as a positive role model, epitomizing personal health and fitness, enjoyment of activity, and sportsmanship as well as sensitivity to the needs of all participants.
3. Assumes responsibility for his/her professional growth within AAHPERD related fields.
4. Demonstrates commitment to the Jump Rope For Heart program by having served on JRFH committees and/or having presented JRFH workshops or programs.
5. Serves as a JRFH event coordinator
6. Is currently a member of AAHPERD and has been a member for the past **two** years.

Jump Rope For Heart Recognition Award
Official Application Form

This award was developed to recognize and honor outstanding JRFH coordinators on the national level. The JRFH coordinator's commitment, leadership and creative involvement is instrumental in the success of the JRFH program.

Candidate Information

1. Candidate's name_____
   Address_____
   Telephone number (H)_____
   (W)_____
   E-mail _____
2. Educational Background (college, university, and/or other educational training) _____
3. Present Position (title)_____
   Position Description_____
   Years of Service _____
4. School Name_____
   Address_____Ph
   one/Fax_____
5. <u>Brief</u> career summary, including positions, locations, and length of service (a resume is not acceptable)
6. Supervisor Information
   Name_____
   Title_____
   Address_____
   E-mail_____

Teaching and Jump Rope For Heart Involvement

7. Number of years teaching _____
8. Number of years as a JRFH event coordinator_____
9. On a separate sheet of paper, please describe the success of your program(s) in the following areas:
    - **Number of students involved**
    - **Funds raised**
    - **Growth of program**
    - **Obstacles overcome**
    - **Creative and unique ideas incorporated into your JRFH event**
10. On a separate sheet of paper, describe your involvement with JRFH at the local level - beyond your individual event (city-wide event, recruitment of new volunteers, etc).
11. On a separate sheet of paper, please describe in detail your involvement with JRFH at the state and/or national level (state task force, conference or workshop presentations, JRFH state newsletter, State Coordinator, former Joint Projects Committee Member, etc.)
12. Do you coach a JRFH Demonstration Team?_____
    - If so, how many years have you coached a team?_____
    - How many JRFH demonstrations do you do per year? _____
    - How many members do you have on your squad? _____
    - Please list some of your team's most recent performances:

Professional Affiliations/Activities

13. On a separate sheet of paper, please describe your professional affiliations and activities (memberships in professional organizations, elected offices, etc.)

14. On a separate sheet of paper, please list and describe any honors/ awards that you have received related to JRFH, the American Heart Association, and /or HPERD.
15. AAHPERD Membership number_____

    Join date _____

    Expiration Date_____

Additional Information

1. Please attach two letters of recommendation relating to the awards criteria outlined on page 2 of this packet. One of the two letters must be from an AAHPERD member.
2. Please complete and attach the enclosed publicity release form.
3. Please attach any other appendices that you feel further demonstrate your JRFH accomplishments.

Jump Rope For Heart Recognition Awards
Publicity Form

I. Candidate Information

Name_____

Work Address_____

Work Phone _____

Work E-mail _____

Home Address_____

Home Phone _____

Home E-mail _____

AAHPERD District _____

II. School Information

Superintendent _____

Principal_____

Program/Dept. Chair_____

School District Address _____

School District Phone _____

School District Website_____

III. Newspapers (please list local newspapers)

Newspaper_____**Editor**_____

Address_____

Phone_____ **Fax** _____

E-mail_____ **Web address**_____

Newspaper_____Editor_____

Address_____

Phone_____ Fax _____

E-mail_____ Web address_____

IV. <u>Television Station</u> (please list local station)

Station Name/Call Letters_____

Contact Person_____

Address_____

Phone_____ Fax_____

E-mail address_____ Website_____