

2018-19 M-DCPS Best and Brightest Application & Qualification Form

Name: _____ Employee Number: _____

Current Work Location #: _____ Current Work Location Name: _____

2017-18 Work Location #: _____ 2017-18 Work Location Name: _____

Check each year you received Florida's Best and Brightest Teacher Scholarship 2014-15 2015-16 2017-18

Check this box if you are a new teacher without any prior evaluation(s) as of the 2018-19 school year.

Items that must be included, by the applicant, in the application packet for the 2018-19 Florida's Best and Brightest Scholarship in order to determine an individual's qualification include:

1. The 2018-19 M-DCPS Best and Brightest Qualification Form with applicant information completed at the top of the form.
2. Copy of 2017-18 Summative Performance Evaluation (SPE) Rating document (if available). If unavailable, the Office of Human Capital Management will provide.
3. Documentation of official ACT or SAT results with scores highlighted or circled if you have not qualified and received the Best and Brightest Scholarship award prior as indicated above.
4. Copy of the teacher schedule from ISIS showing classes and seats
5. The Confirmation of Classroom Teaching Responsibilities signed by the applicant and the principal of the school where s/he works.

Applications and all required information are due to the Office of Human Capital Management, SBAB Room 271, Mail Code 9311, by November 1, 2018. No late application can be accepted!

FOR OFFICE USE ONLY

1. Verification of 2018-19 SPE Rating	Circle One				Met?		Reviewer's Initials				Date	
	New Teacher		HE	EF	DNI	UN	Y	N				
	<input type="checkbox"/>	Date of Hire										

2. Verification of ACT/SAT Scores	Confirm prior Qualification		Test	Test Mo & Yr	Scores Reported	Scores Required	Met?		Reviewer's Initials		Date
	2014-15	2015-16	SAT		Math:	Math:	Y	N			
	Y	N	Y	N	%ile on report?	Read:					
			ACT	Y _____	N	Combined:	Combined:				

3. Verification of Classroom Teacher Responsibilities	Schedule attached?		Confirmation of Classroom Teaching responsibilities attached?				Teacher Signature?		Principal Signature?		Met?		Reviewer's Initials		Date
	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N			

4. Final Verification of Eligibility Approved Declined _____
Reviewer's Signature _____ Date _____

Applications and all information must be received by the Office of Human Capital Management, SBAB Room 271, Mail Code 9311, on or before November 1, 2018.