### THE NORTH CAROLINA CTE TEACHER OF THE YEAR

#### 2026 APPLICATION PORTFOLIO



#### INSTRUCTIONS FOR COMPLETING THE NCCAT CTE PORTFOLIO

- The nominee must meet the general qualifications as outlined.
- All information requested for the portfolio must be provided.
- Signatures of the nominee and the nominee's CTE Director MUST be included.
- In order to provide all nominees with an equal opportunity, responses are limited to the response fields provided.
- The regional selection committee will **not** consider any additional pages and/or materials submitted.
- Topic questions in sections II, III, and IV must be answered in essay format by the nominee.
- Regarding Section VI, three (3) letters of support must be submitted from among any of the following: administrators, colleagues, parents, or students.
- **Please do not convert this PDF into a Word Document.** If you have issues filling in the application, you may contact NCCATctetoy@nccat.org.
- Should you have any questions regarding the portfolio, please contact NCCATctetoy@nccat.org.
- This APPLICATION PORTFOLIO must be received by May 5, 2025. After completing the portfolio, submit electronically via email as one document to NCCATctetoy@nccat.org.

Click here to view DPI Educational Region Map



## **2024 CTE TEACHER OF THE YEAR APPLICATION**

**SECTION I: INFORMATION FORM** To be completed by NOMINEE and signed by CTE Director & NOMINEE.

NOMINEE	INFORMATION		
REGION (Please refer to the map, linked on page 1 if you are unsure)			
	SCHOOL		
	DISTRICT:		
FIRST NAME:	LAST NAME:		
EMAIL:	PREFERRED NAME:		
LIVIALE.	THE ENNED WAIVIE.		
HOME ADDRESS:	PHONE NUMBER:		
CTE AREA:	CITY:	STATE:	ZIP:
YEARS TAUGHT:	CLASS(es) CURRENTLY TEACHING:		
SCHOOL I	NFORMATION		
SCHOOL NAME:	SCHOOL TELEPHONE:		
SCHOOL ADDRESS:	CITY:	STATE:	ZIP:
DDINGIDAL/C MANAF	TA A A II .		
PRINCIPAL'S NAME:	EMAIL:		
DISTRICT	INFORMATION		
CTE	SUPERINTENDENT:		
DIRECTOR:			
DIRECTOR	SUPERINTENDENT		
EMAIL:	EMAIL:		
TELEPHONE:			
COUNTY / DISTRICT OFFICE ADDRESS			
CITY, STATE, ZIP:			
I acknowledge that the nominee meets the ge	eneral qualification for the	NCCAT CTE	award as outlined.
CTE DIRECTORIS SIGNATURE		DATE	
CTE DIRECTOR'S SIGNATURE		DATE	
NOMINEE'S SIGNATURE		DATE	

## SECTION II: High Quality CTE Program Implementation To be completed by the NOMINEE.

QUESTION: How have you contributed to implementing high quality CTE programs that ensure student success? Please refer to High-quality CTE Framework as a guide/reference. Answer the question in the field below. Ex. development of standards-aligned and integrated curriculum; contributions that resulted in student achievements, opportunities and innovations; CTSO successes; etc.) (5,000 characters (not words) max. This includes spaces)

### **SECTION III: Innovation** To be completed by the NOMINEE.

**QUESTION:** How do you demonstrate innovation in CTE? Answer the question in the field below. (Ex. improvements implemented to program or institution; new activities or initiatives spearheaded; creative or cutting-edge classroom practices) (5,000 characters (not words) max. This includes spaces.

## **SECTION IV: Leadership** To be completed by the NOMINEE.

QUESTION: How have you demonstrated leadership in improving CTE and/or student opportunities in the local or greater CTE community? Ex. activities conducted with community leaders, business & industry partners, fellow educators, or ACTE and other organizations) (5,000 characters (not words) max. This includes spaces.

# **SECTION V: Letters of Support**

Include three (3) letters of suppo	$\underline{rt}$ from among the following: add	ministrator, CTE Director, colleagues,
parents of student, or students.	The letters should be no more t	han one typed page each.

Name:	
Delette edite te New tees	
Relationship to Nominee.	

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