

# 2018-2019 Leon County Schools Best and Brightest Qualification Form

Name: \_\_\_\_\_ Last 4 of SSN: \_\_\_\_\_

Current Work Location #: \_\_\_\_\_ Current Work Location Name: \_\_\_\_\_

2017-18 Work Location #: \_\_\_\_\_ 2017-18 Work Location Name: \_\_\_\_\_

I was a recipient of Florida's Best and Brightest Teacher Scholarship last school year.

Check one: YES NO

I am a **new teacher** without a prior school year evaluation.

Check one: YES NO

The following documents are required in order to be considered for the 2018-19 Best and Brightest Teacher Scholarship:

1. 2018-19 LCS Best and Brightest Teacher Scholarship Qualification Form.
2. Copy of **summative evaluation sheet** from the 2017-18 Performance Evaluation Rating document.
3. Documentation of ACT or SAT results. **Exception:** Former LCS Best and Brightest recipients with scores on file in HR.
4. Copy of the teacher schedule or class roster generated from FOCUS showing classes and class loads.
5. Confirmation of Classroom Teaching Responsibilities signed by the applicant and the Principal of the work location.

***Applications and all required documentation must be hand delivered to the  
LCS Human Resource Department, 2757 West Pensacola Street, Tallahassee, FL 32304, by 5:00 pm., November 1, 2018.  
No late applications will be accepted.***

**DO NOT WRITE BELOW THIS LINE - THIS SECTION FOR LCS DISTRICT STAFF USE ONLY**

1. Verification of 2017-18 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		Composite Scores		Met?	Rev. Initials	Date
	2016-17		2017-18		SAT			Math:			Yes		
	Y	N	Y	N	%ile on report?	Read:		Read:		No			
			ACT	Y _____	N	Writing:		Writing:				Required	

3. Verification of Classroom Teacher Responsibilities	Form attached		Class Rosters/Class Schedules or Class Syllabus or other documention attached?				Teacher Signature		Principal Signature		Met?		Reviewer's Initials		Date
	Y	N	Y				N		Y	N	Y	N			

4. Final Verification of Eligibility  Approved  Disqualified

Reviewer's Signatures

Date