

**AFC FACULTY COMMISSION**

**CALL FOR NOMINATIONS**

**Do you know of an outstanding professor?**

**Please nominate him or her for the**

**Association of Florida Colleges**

**2019 Professor of the Year**

**Deadline: Friday, March 1st 2019**

**Directions:**

If you know an outstanding professor, please email the attached nomination form, nomination letter, and teaching documents to Faculty Commission Vice Chair, Lori Bufka**,** no later than **March 1st 2019**. Nominations can be made by any AFC member.

Please email the files as PDF or Word documents: bufkal@cf.edu

DO NOT SEND ZIP FILES AS THEY WILL BE REJECTED BY CF’s SERVER!!!

Five judges (one from each region) will score the portfolios using rubric included herein. Please share the rubric with nominees. Portfolios which do not contain all the documents required may not be accepted for review.

Semifinalists will be notified by Friday, March 25th and will be asked to make a fifteen minute instructional presentation illustrating their expertise in the classroom at the Wednesday afternoon session at the Spring Conference on College Teaching and Learning in St. Petersburg April 3 - 5. The top three finalists will then be chosen to present again on Friday morning of the Spring Conference on College Teaching and Learning. The AFC Professor of the Year will be announced during the Awards Ceremony at the Awards Luncheon for the Spring Conference along with the other faculty awards.

**Nominees must be:**

* Teaching faculty at an AFC member institution at the time of submission
* AFC Member in good standing
* Able to attend the Faculty Commission Spring Conference (St. Petersburg); please check the AFC website: [www.myafchome.org](http://www.myafchome.org)

**The following documentation materials must be provided:**

* A completed nomination form (see below)
* A letter from the nominator explaining the reasons for the nomination (800 words maximum)
* Nominee’s Curriculum Vitae or Résumé
* A statement of “Teaching Philosophy,” written by the nominee

(1500 words maximum)

* An overview of the presentation that, if selected, will be given during Spring Conference; including a clear statement of the student learning outcomes intended by the presentation (Please keep the set-up time required for the presentation to 10 minutes or less. Computer equipment will be available on-site.)
* Additional recommendations from students, colleagues, and/or administrators who support the nomination (5 maximum)

**Please send all above listed materials via email to:**

Lori Bufka

AFC Faculty Commission Vice-Chair

College of Central FL

3001 S.W. College Rd.

2-220C

Ocala, FL 34474

bufkal@cf.edu

352-873-5800 x1375

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**NOMINATION FORM**

**AFC PROFESSOR OF THE YEAR**

**AWARD FOR INSTRUCTIONAL EXCELLENCE**

**NOMINEE INFORMATION:**

Nominee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AFC Chapter \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title/Rank \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Campus \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOMINATOR INFORMATION:**

Nominator \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AFC Chapter \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title/Rank \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Campus \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Nominee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Nominator’s Signature**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notes:

* An e-signature is acceptable
* Please feel free to delete the lines above and type in your answers in order to submit a typed nomination form

WRITTEN SUBMISSION EVALUATION FORM

**(For Assessing AFC Professor of the Year Nominations)**

**Nominee:**

**Discipline:**

**College:**

|  |  |  |
| --- | --- | --- |
| **Strength of Recommendations** | **Possible** | **Score** |
| Nominator’s Recommendation | 5 |  |
| Supporting Recommendations | 5 |  |
| **Teaching Philosophy** |
| Effective Statement of teaching philosophy | 5 |  |
| Commitment to diverse modes of student success | 5 |  |
| Commitment to vision and mission of the State College system | 5 |  |
| **Proposed Presentation** |
| Original/Innovative instructional approach | 5 |  |
| Transferability of approach to other instructional areas | 5 |  |
| Clear statement of intended learning outcomes | 5 |  |
| **Professional Service** |
| Professional Organizations | 5 |  |
| Leadership Positions | 5 |  |
| Commitment to student success beyond the classroom | 5 |  |
| Total | 55 |  |

* **Evaluator’s Full Name**
* **Signature of Evaluator**
* **Evaluator’s Discipline**
* **Evaluator’s College**
* **Date Completed**