



**DELAWARE DECA  
MARKETING EDUCATION TEACHER/COORDINATOR OF THE YEAR  
NOMINATION FORM**

**Due: with Conference Registration**

Name of Candidate \_\_\_\_\_

Address \_\_\_\_\_

Present Position \_\_\_\_\_

School \_\_\_\_\_

**DELAWARE DECA INVOLVEMENT (to be completed by the nominators):**

A. In what ways was the candidate helpful to the continuing growth and development of Delaware DECA, both on the local and state levels?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B. As applicable, list additional reasons for recommending this teacher.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Nomination presented by:

\_\_\_\_\_  
Name/Chapter (Please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Phone Number

Please return the completed nomination form to the DECA State Office.

**NOTE: *The previous year's winner is eligible.***