

VSLA Exemplary Literacy Award Application

Year _____

School Name _____

School Address _____

1. Principal's Name
Address
Phone
E-mail
Principal's Signature _____
(This signature must be included in order for application to be complete)

2. School District:
District Administrator's Name (Superintendent or
Designee)
Address
Phone
Email
District Administrator's Signature: _____
(This signature must be included in order for application to be complete)

3. List the names of VSLA members at your school:

4. Contact Person (the name of the individual to be contacted regarding this application):
Name
Email
Position

5. Demographic Information:
Public
Private

Describe your School Population/Characteristics (Poverty & School Information, Location, urban, rural or suburban, etc.):

Attach a 3-5 page response that describes why your school has an Exemplary Literacy Program. Respond to the question, "How does your school advance literacy in Virginia?" Consider including information on school strengths across a variety of areas in your response: Implementation of Research/Best Practices in Reading and Writing, Focus on Student Learning, Programs/Initiatives, Innovation, Professional Development, Literacy Materials, and Community Involvement.

