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## IASC Advisor of the Year

The Illinois Association of Student Councils' Advisor of the Year Program has been established to recognize and call attention to the outstanding efforts of student council advisors and their commitment to excellence and service to young people in their schools, districts, and across the state.

Each IASC district may nominate one advisor. The nominee's school must be a member of the IASC. The IASC Executive Board will select one award recipient. The IASC Advisor of the Year Award recipient will be celebrated with a commemorative plaque at the annual State Banquet.

### Suggested Nomination Criteria

1. **Local Involvement:** Successful candidates must have demonstrated their willingness to support student council activities in their school with adequate time and energy, as well as have provided appropriate representation of their council's activities to faculty and administration. Candidates must be enthusiastic proponents of their council in the community.
2. **District Involvement:** Successful candidates have promoted participation by their council in their district. Their councils have demonstrated this commitment through regular attendance and active participation in district activities.
3. **State Involvement:** Successful candidates have promoted participation in IASC sponsored programs and activities. Their councils have demonstrated this commitment through regular attendance and active participation.

To nominate an advisor for the IASC Advisor of the Year, the nomination form must be completed and one letter of recommendation supporting the nominee's commitment to student council must also be submitted. This letter can be from one of the following:

- Nominee's school principal or administrator
  - Nominee's student council president or designee (another student council officer)
  - A member of the nominee's district Executive Board (student or adult member)
4. It is the expectation that nominees and their schools will be in attendance at the IASC State Banquet.

# IASC Advisor of the Year Award

## NOMINEE INFORMATION

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Name of Nominee: \_\_\_\_\_

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

School Phone: \_\_\_\_\_

School Email: \_\_\_\_\_

IASC District: \_\_\_\_\_

Official school position/title of nominee: \_\_\_\_\_

School Principal's Name: \_\_\_\_\_

Is the nominee the primary adult supervising student council in their school? \_\_\_\_\_

Number of years serving as a Student Council Advisor at the local level: \_\_\_\_\_

Please attach a letter of recommendation along with the application and Activities Worksheet.

**Applications must be postmarked no later than April 11, 2025.**

Please send application to: Gary Clark  
IASC Executive Director  
96 Stonebridge Bluff Dr.  
Maryville, IL 62062

Or submit via email to: gclark51@yahoo.com

## Activities Worksheet for IASC Advisor of the Year

**Nominee:** \_\_\_\_\_

*Activities/Honors/Awards/Recognitions listed should have taken place from 2024 IASC Convention to 2025 IASC Convention*

**Local Student Council Activities:** (Use given space only)

- Identify up to ten of the most important activities/projects sponsored by your student council
- Identify the outcome each one had on the intended audience (council/student body, etc.)

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

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Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

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Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

**District Student Council Activities:** (Use given space only)

- Identify up to five of the most important student council activities within your district that you have participated in, directed, and/or district positions you have held.

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

**State Student Council Activities:** (Use given space only)

- Identify up to five of the most important student council activities within your state that you have participated in, directed, and/or state positions you have held.

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes:

**Honors/Awards/Recognition:** (Use given space only)

- List up to five honors, awards, and/or recognitions you have received that directly relate to your involvement in student council or education.

Recognition Name: \_\_\_\_\_

Date: \_\_\_\_\_

Purpose of Recognition and Why

Recognition Name: \_\_\_\_\_

Date: \_\_\_\_\_

Purpose of Recognition and Why

Recognition Name: \_\_\_\_\_

Date: \_\_\_\_\_

Purpose of Recognition and Why

Recognition Name: \_\_\_\_\_

Date: \_\_\_\_\_

Purpose of Recognition and Why

Recognition Name: \_\_\_\_\_

Date: \_\_\_\_\_

Purpose of Recognition and Why

**Other Leadership and Service Activities:** (Use given space only)

- List any additional involvement in your school, community, or organizations where you have contributed your leadership or service (up to five).

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes

Activity Name: \_\_\_\_\_

Date: \_\_\_\_\_

Highlights and Outcomes