



**FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT**  
**ADMINISTRATIVE ACHIEVEMENT AWARD APPLICATION**

**ELIGIBILITY CRITERIA FOR THE ADMINISTRATIVE ACHIEVEMENT AWARD:**

- An administrator must have completed at least 4 years as an administrator in the District and served for one year at the top step of the administrative salary schedule.
- Grant or Categorically Funded Administrators are eligible for an Award if the grant funds are available to support the award.

DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

APPLICANT NAME: \_\_\_\_\_

DIVISION/DEPARTMENT: \_\_\_\_\_

FIRST DAY EMPLOYED AS AN ADMINISTRATOR: \_\_\_\_/\_\_\_\_/\_\_\_\_

IF THIS YOUR FIRST, SECOND, THIRD OR FOURTH APPLICATION? \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant requesting consideration of an Administrative Achievement Award      \_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

\*\*\*\*\*

**THIS AREA TO BE COMPLETED BY THE EVALUATING ADMINISTRATOR**  
**Application Checklist:**

- \_\_\_\_\_ 1. A letter of application
- \_\_\_\_\_ 2. Current "comprehensive" evaluation per Chapter IX, Section C, Area 1\*
- \_\_\_\_\_ 3. Four-Year Summary of Professional Growth Activities per Chapter IX, Section C, Area 2
- \_\_\_\_\_ 4. Special service activity for each year of the four years per Chapter IX, Section C, Area 3

\*Chapter IX, Section C, Area 1 defines "current" to be within the three-year period immediately preceding the award application.

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I do \_\_\_\_ / do not \_\_\_\_ recommend approval.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
College President or Chancellor (required signature)      \_\_\_\_/\_\_\_\_/\_\_\_\_  
Date