

ASSOCIATION OF ASSISTANT PRINCIPALS

MARTIN SAFRAN CITIZENSHIP AWARD APPLICATION

www.aapnyc.com

40 Rector Street
New York, NY 10006



APPLICATION DEADLINE: Wednesday, March 8, 2024; Open to AAP Members ONLY

The AAP sponsors the Martin Safran Citizenship Award. We offer *current members* of the association the opportunity to nominate students who have displayed exemplary citizenship. We will select 15 students from elementary, K-8 and middle schools to receive the Martin Safran Citizenship Award. The winners will be honored at our annual dinner on Tuesday, June 4th. Each winner may bring their nominating Assistant Principal and one parent or guardian, as our guests.

ELIGIBILITY:

- The student **must** be recommended by their Assistant Principal who, in turn, must be a member of the AAP (no more than **three** applications per school).
- Fill out a separate application (next page) for each student you nominate.
- The student can be in any grade, K through 8.
- The student should demonstrate service to their school, family and/or community.
- Greater weight will be given to applicants who demonstrate service both in school and in their community.
- The student should write a detailed essay describing their school, family and/or community service using these three questions as a guide:
 1. Why is your service important?
 2. How did it help change your school/family/community?
 3. What did you learn from this service?
- Unfortunately, previous winners are not eligible and schools are limited to one winner per year.
- Winners will receive an award to display and a new cash prize amount of \$200!

The application is below, or you may download it at: www.aapnyc.com

APPLICATIONS ARE DUE March 8, 2024

Send the completed application with student work to:

Association of Assistant Principals
Catherine Jarrat Koatz
PS196Q—Assistant Principal
cjarrat@schools.nyc.gov

For AAP membership applications and other applications, check our website: www.aapnyc.gov

Possible Service Ideas for 2023-2024
Volunteering for Community Service
Involvement in Social Justice Issues
Tutoring and Academic Support
Intergenerational Service

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Please also fill out the section(s) at the bottom to verify your student's activities.

Student Name: _____		
School: _____	District: _____	Borough: _____
Grade: _____	Age: _____	
Home Address: _____		
City: _____	State: _____	Zip: _____
Parent Home or Cell Number: _____		
Name of Parent/Guardian: _____		
Name of AAP Member Submitting Nomination: _____		
School Address: _____		
City: _____	State: _____	Zip: _____
School Telephone Number: _____	Fax: _____	
Assistant Principal Email Address: _____		
Assistant Principal Cell Number: _____		

SUMMARY OF STUDENT'S SERVICE IN SCHOOL:

SUMMARY OF STUDENT'S SERVICE IN THE COMMUNITY:

ASSISTANT PRINCIPAL'S SIGNATURE: _____ DATE: _____

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