

2027-2030

AWARDS/SCHOLARSHIPS NOMINATIONS

RIVHSA  
Celebrating  
HEAD  
START Heroes



3.11.2026

# Celebrating Head Start Heroes

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# Guidelines & Applications for RIVHSA Awards & Scholarships

## Section I – General Information

### A. About the Process

Recognition and appreciation are fundamental human needs. People want to be respected and valued for their work or accomplishment. By honoring Head Start and Early Head Start employees, parents, alumni, volunteers and partners, we not only confirm the value of their work or the impact of their success but also motivate them to reach new heights. The Region IV Head Start Association’s (RIVHSA) awards/scholarships program is a powerful vehicle for elevating excellence, engaging the community, and celebrating milestones.

RIVHSA’s application process has distinct phases. Unlike other regions, RIVHSA’s application process allows recipients to compete and be recognized at all phases of the process – local, state, regional, and national! At the conclusion of each phase, the most competitive applicants continue to the next level.

1. Local grantee submits to state affiliate;
2. State affiliate selects state recipients and forwards to regional affiliate;
3. RIVHSA selects regional recipients and forwards winners in national categories to NHTA; and
4. NHTA selects national recipients.

RIVHSA uses a panel of independent judges to score nominations. The final slate of recipients is reviewed and ratified by RIVHSA’s Awards/Scholarships Committee and Board of Directors.

In Region IV, our grantee members have a total of **18** award and scholarship categories open for nominations. The National Head Start Association (NHTA) has **6** national categories which are also observed at the regional level by RIVHSA. In addition, RIVHSA offers **12** categories exclusively for our regional grantees that are not recognized at the national level. Grantees and state affiliates must submit nominations as specified by each entity to be considered. The national and regional processes are outlined below.

### B. Eligibility Period

All award applications must reflect services contributed during the current program/school year as of June 30. The chart below specifies the eligibility period for each award year.

Award Presentation Year	School Year Earned
2027	July 2025 – June 2026
2028	July 2026 – June 2027
2029	July 2027 – June 2028
2030	July 2028 – June 2029

### C. Nomination & Selection Calendar

March 15	RIVHSA opens region-specific awards and scholarships process.
June 15 – July 15	State affiliates accept nominations from local programs using the RIVHSA nomination forms. State affiliates review nominations received from local programs and make selection for state recipients.
July 15	Deadline for state affiliates to send selected recipients to RIVHSA for national and region-specific categories.
July 16 – September 30	RIVHSA reviews applications for completeness and assembles judging packets.  RIVHSA assembles independent panel of judges. Judges review and score state nominations.
October 1-15	RIVHSA’s Awards/Scholarships Committee confers and ratifies slate of regional recipients at its 1 <sup>st</sup> quarter meeting.  RIVHSA releases its slate of regional recipients to nominating grantees and state associations.
October 15-December 15	RIVHSA compiles awards program using recipient and nominee information.
February	RIVHSA holds an award ceremony at its annual conference to recognize regional recipients.
April/May	NHTA holds an award ceremony at its annual conference to recognize national recipients.

# Celebrating Head Start Heroes

## D. Nomination, Selection, and Recognition Process

RIVHSA's application process for national categories has four distinct phases. Unlike other regions, RIVHSA's application process for national categories allows recipients to compete and be recognized at all phases of the process – local, state, regional, and national. At the conclusion of each phase, the most competitive applicants continue to the next level until a national recipient is selected as indicated below:

1. **LOCAL GRANTEE:** Grantees determine nominees from their agency for categories in accordance with NHTSA guidelines, then submit nominations to their state affiliate using the national categories forms provided in this document. See additional grantee requirements below (Section II, Parts C and D). Grantees should contact their state affiliate for state-specific filing deadlines. Grantees are encouraged to recognize their nominees at the local level.

### Grantee Roles & Responsibilities

When nominating candidates for an award or scholarship, local grantees must:

1. Be an active agency member in good standing with RIVHSA
2. Be an active agency member in good standing with their respective state head start association
3. Contact their state head start association for state deadlines to submit nominations.
4. Submit complete applications on the correct form. Incomplete applications or incorrect forms will not be considered.
5. Assume responsibility for all expenses related to the application process or the attendance of recipients or nominees at the awards ceremony (i.e. lodging, per diem, transportation). RIVHSA is not responsible for any travel expenses incurred by organizations or individuals.
6. Send a high-resolution digital image in jpg format to awards@rivhsa.org by **December 15** for inclusion in the Awards Gala program.

2. **STATE ASSOCIATION:** State affiliates establish their nomination and selection process in accordance with RIVHSA timelines and guidelines. Affiliates must forward their state nominees by postal mail only to RIVHSA by **July 15** for the selection of regional recipients. See additional affiliate requirements below (Section II, Parts C and D). Affiliates are encouraged to recognize their nominees at the state level.

### State Affiliate Roles & Responsibilities

When nominating candidates for an award or scholarship, state affiliates must:

1. Be an active affiliate member in good standing with RIVHSA.
2. Have a formalized nomination and selection process. State Presidents are asked to designate a representative for the selection of awards/scholarships recipients to ensure that all nominations are processed and submitted in a timely manner for competition at the regional level.
3. Submit complete applications on correct forms. Incomplete applications or those submitted on incorrect forms will not be considered at the regional level.
4. Follow submission instructions:
  - a. RIVHSA must receive state nominations by **July 15**.
  - b. Include a completed State Confirmation Form. RIVHSA will not accept nominations without a completed form.
  - c. Submit 4 print sets of each nomination: 1 original and 3 complete copies. **DO NOT STAPLE** documents; Use paper clips/binder clips to separate the 4 sets. Documents may be bound by paper or binder clips.
  - d. Send by postal mail only to:

RIVHSA  
ATTN: Awards/Scholarships  
Post Office Box 1049 - Snellville, GA 30078

5. Share the regional list of recipients with all state nominees to include non-winners once notified by RIVHSA.
6. Send a high-resolution digital image in jpg format to awards@rivhsa.org by **December 15** for inclusion in the awards ceremony program.

## Guidelines & Applications for RIVHSA Awards & Scholarships

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| <p>3. <b>REGIONAL ASSOCIATION:</b> RIVHSA's panel of independent judges review and score state affiliate nominations. RIVHSA's Awards/Scholarships Committee confers and ratifies regional recipients at its 1<sup>st</sup> quarter meeting in October. RIVHSA notifies grantees and state associations of its slate of regional recipients. RIVHSA submits its national category recipients to the National Head Start Association for competition; RIVHSA does not endorse any other national nomination that has not been vetted through the RIVHSA process. RIVHSA recognizes its regional recipients during an awards ceremony held in conjunction with its annual conference.</p> |
| <p>4. <b>NATIONAL ASSOCIATION:</b> NHSA's panel of independent judges review and score nominations. NHSA notifies recipients and nominating entities of its slate of national recipients. NHSA recognizes national recipients during an awards ceremony held in conjunction with its annual conference.</p>   |

### **Recipient Recognition at the RIVHSA Awards Gala**

RIVHSA celebrates the contribution and achievement of regional award and scholarship recipients at our Awards Gala which is held in conjunction with our annual conference each February. Visit our website to learn more about the conference and gala: <https://rivhsa.org/training-events/annual-conference/>

- The designated attire for this event is semi-formal to formal.
- RIVHSA is not responsible for travel expenses related to event attendance by regional nominees or recipients.
- RIVHSA does provide each recipient with a ticket to the Awards Gala held in conjunction with our February conference.
- Event tickets are available to purchase for those wishing to attend the gala only. Advance ticket purchase is required.

# Celebrating Head Start Heroes

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## Section II - NATIONAL CATEGORIES (NATIONAL HEAD START ASSOCIATION)

Local grantees interested in nominating applicants for the categories listed below must apply using RIVHSA nomination forms. RIVHSA is not responsible for any expenses incurred by organizations or individuals participating in this process. The National Head Start Association (NHSA) is the lead organization for these categories and determines the regional nomination and selection criteria for the categories listed below:

### AWARDS - 4

Edward Zigler Innovation

Sargent Shriver Excellence in Community Service  
Regionally known as the Billy J. McCain, Sr. Excellence in Community Service

Aubrey Puckett Memorial  
Regionally known as the Dr. Arvern Moore Memorial

Vanessa Rich Leadership Award

### SCHOLARSHIPS - 2

Ron Herndon Scholarship for Head Start Parents  
Regionally known as the William S. Fillmore Scholarship for Head Start Parents

Head Start Alumni Scholarship  
Regionally known as the Ernestine Smith Scholarship for Head Start Alumni

### General Rules for National Categories

NHSA Scholarship and Award recipients serve as models and ambassadors for the Head Start community. Recipients will be encouraged to share successful strategies with others during NHSA conferences, institutes, and gatherings.

1. Applications are nominated from the Regional Associations, the National Migrant and Seasonal Head Start Association, or the National Indian Head Start Directors Association, for your respective grant. Your nomination must include a nomination letter from your nominating association on their letterhead. You only need support from one of your affiliated regional or national associations. **RIVHSA submits its national category recipients to the National Head Start Association for competition. RIVHSA does not endorse any other national nomination that has not been vetted through the RIVHSA process as outlined on page 4.**
2. Applicants must be associated with a program that is a current member of NHSA. For Sargent Shriver Excellence in Community Service Award and the Edward Zigler Innovation Award, a grant recipient and a community partner are required.
3. An individual may not be nominated for more than one scholarship or award per year. Local member programs may not nominate more than one person or program.
4. Applications must be submitted online. Incomplete applications will not be considered; nominees will be contacted primarily via email.
5. Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
6. Applicants allow NHSA to publicize their nomination.
7. NHSA board members, staff, and family members are ineligible.

# Guidelines & Applications for RIVHSA Awards & Scholarships

## Section III – REGIONAL CATEGORIES FOR REGION IV GRANTEES ONLY

RIVHSA offers several regional categories which are not recognized at the national level; therefore, state nominees submitted to RIVHSA will compete at the regional level only for these categories. Local grantees interested in nominating applicants for the categories listed below must apply using RIVHSA nomination forms. RIVHSA is not responsible for any expenses incurred by organizations or individuals participating in this process. RIVHSA is the lead organization for these categories and determines the regional nomination and selection criteria for the categories listed below:

### AWARDS - 11

Administrator of the Year	Beating the Odds
Teacher of the Year	Parent of the Year
Staff of the Year	Father of the Year
Support Staff of the Year	Humanitarian of the Year
Achievement	Corporate
Oral Health	

### SCHOLARSHIPS - 1

Scholarship - Head Start Staff

### General Rules for Region-Specific Categories

RIVHSA Scholarship and Award recipients serve as models and ambassadors for the Head Start community. During their year, winners will be encouraged to share successful strategies with others during RIVHSA conferences, institutes and gatherings.

1. State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination.
2. All scholarship and award applications must reflect services contributed during the specified program year.
3. Grantees and state affiliates must be current RIVHSA members. Some award/scholarship types require individual membership. Membership status will be verified by RIVHSA. Non-member applications will not be considered.
4. Applicant may not be nominated for more than one regional category per year.
5. All criteria for an award or scholarship must be met. RIVHSA will review all applications for completeness in accordance with guidelines. Incomplete applications will not be considered.
6. Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
7. Applicant must be willing to allow RIVHSA publicize their nomination or receipt of honor.
8. Recipients are invited to attend the awards ceremony which will be held during RIVHSA's annual conference each February. RIVHSA is not responsible for housing, transportation, or other expenses associated with attending the awards ceremony.
9. State affiliates, nominating grantees, nominees and recipients will be contacted primarily by e-mail.

**Eligibility Period:** All award applications must reflect services contributed during the current program/school year as of June 30. The chart below specifies the eligibility period for each award year.

Award Presentation Year	School Year Earned
2027	July 2025 – June 2026
2028	July 2026 – June 2027
2029	July 2027 – June 2028
2030	July 2028 – June 2029

### Focus Area Awards: Administrator of the Year, Staff of the Year, and Support Staff of the Year

The focus area rotates on an annual basis for these awards. RIVHSA determines the focus area for the award category. The schedule is as follows:

	Cycle FYE 2024	Cycle FYE 2025	Cycle FYE 2026	Cycle FYE 2027	Cycle FYE 2028	Cycle FYE 2029
	<b>AWARD GALA FEB 2025</b>	<b>AWARD GALA FEB 2026</b>	<b>AWARD GALA FEB 2027</b>	<b>AWARD GALA FEB 2028</b>	<b>AWARD GALA FEB 2029</b>	<b>AWARD GALA FEB 2030</b>
<b>ADMINISTRATOR</b>	Center Director	Assistant/Deputy Director	Director	Grantee Executive Director	Center Director	Assistant/Deputy Director
<b>STAFF</b>	<u>ECD/Health Transition</u>	Family Services	<u>ECD/Health Nutrition</u>	Parent, Family, and Community Engagement	<u>ECD/Health Mental Health</u>	<u>ECD/Health Early Care &amp; Learning</u>
<b>SUPPORT STAFF</b>	Technology Services	Nutrition Services	Transportation Services	Administrative Support	Classroom Support	Facility Services

# Guidelines & Applications for RIVHSA Awards & Scholarships

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Revised March 2026

## NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION Edward Zigler Innovation Award

### Overview

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This award honors the memory of **Dr. Edward Zigler** by celebrating local programs who have partnered to create high impact services for children and families.

#### General Information

- This award does require a joint application from a Head Start grant recipient and a community partner.
- RIVHSA will present the recipient with a commemorative plaque and \$100 award.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 6-7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA and NHTA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional or national category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHTA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

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The nominee must:

1. Qualification: Be a Head Start or Early Head Start grant recipient and include a community partner in the application.
2. Supporting Statement (80 points): Submit a supporting statement to address the following:
  - (20 points) Biographical Profile: A description of the primary and partner agency involved in the delivery of services, including demographic information, and history in the local community
  - (30 points) Innovation Summary: A brief description of the specific innovation, the approach, and names of all partners
  - (30 points) Outcomes/Impact Summary: A brief description of the outcomes or impact of the effort on vulnerable children and families that are unique and/or go beyond Head Start's performance standards
3. Reference Letters (20 points): Provide two letters of reference from two organizational leaders external to the program and the community partner who know the impact of the partnership firsthand.

# Celebrating Head Start Heroes

Revised March 2026

**NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION**  
**Edward Zigler Innovation Award**

Be sure to complete the form below in its entirety. All fields are required. Please type or print clearly.

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name					
Head Start or Early Head Start Director					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			
E-Mail					

**Community Partner** (No abbreviations)

Agency Name				Date	
Mailing Address					
City		State		Zip Code	
Telephone				E-Mail	

**Membership Information**

Category	Membership #
National Head Start Association	
Region IV Head Start Association	
Your State Head Start Association	

**Submission Checklist:** Check each box to indicate that required materials are attached.

- Application Form
- Supporting Statement
- Reference Letters

**Application Process:** Nominations will be processed by phase as indicated below:

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.
- **REGIONAL ASSOCIATION:** Submit regional recipients to NHSA for national competition by the filing deadline.

# Guidelines & Applications for RIVHSA Awards & Scholarships

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Revised March 2026

## NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION

### Sargent Shriver Excellence in Community Service Award

*Regionally known as the Billy J. McCain, Sr. Excellence in Community Service Award*

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## Overview

This award honors the memory of **Sargent Shriver** by recognizing grantees that have made significant achievements in poverty alleviation, early education, or community health in partnership with others.

### RIVHSA's Billy J. McCain, Sr. Community Service Award

RIVHSA renamed and recognizes the award regionally in honor of **Billy J. McCain, Sr.** who served as President of the Region IV Head Start Association. RIVHSA acknowledges his distinguished service as an officer and legacy as a Head Start and Community Action advocate.

### General Information

- This award does require a joint application from a Head Start grant recipient and a community partner.
- RIVHSA will present the recipient with a commemorative plaque and \$100 award.

### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 6-7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA and NHSA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional or national category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHSA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

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## Applying for the Award

The nominee must:

1. Qualification: Be a Head Start or Early Head Start grant recipient and include a community partner in the application.
2. Supporting Statement (80 points): Submit a supporting statement to address the following:
  - (20 points) Biographical Profile: Key demographic and historical context of the local community.
  - (30 points) Innovation Summary: The specific contribution(s), approach, and leaders of the effort.
  - (30 points) Outcomes/Impact Summary: Outcomes that are unique and/or go beyond Head Start's performance standards.
3. Reference Letters (20 points): Provide two letters of reference from two organizational leaders external to the program and the community partner who know the impact of the partnership first-hand.

# Celebrating Head Start Heroes

Revised March 2026

**NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION**  
**Sargent Shriver Excellence in Community Service Award**  
*Regionally known as the Billy J. McCain, Sr. Excellence in Community Service Award*

Be sure to complete the form below in its entirety. All fields are required. Please type or print clearly.

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name					
Head Start or Early Head Start Director					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			
E-Mail					

**Community Partner** (No abbreviations)

Agency Name			Date		
Mailing Address					
City		State		Zip Code	
Telephone				E-Mail	

**Membership Information**

Category	Membership #
National Head Start Association	
Region IV Head Start Association	
Your State Head Start Association	

**Submission Checklist:** Check each box to indicate that required materials are attached.

- Application Form
- Supporting Statement
- Reference Letters

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.
- **REGIONAL ASSOCIATION:** Submit regional recipients to NHSA for national competition by the filing deadline.

# Guidelines & Applications for RIVHSA Awards & Scholarships

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Revised March 2026

## NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION

### **Aubrey Puckett Memorial Award**

*Regionally known as the Dr. Arvern Moore Memorial Award*

#### **Overview**

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This award honors the memory of **Aubrey Puckett** by celebrating Head Start alumni and parents who come full circle—working in programs, advocating for Head Start, and serving their communities with passion and purpose.

#### RIVHSA's Dr. Arvern Moore Memorial Award

RIVHSA renamed and recognizes the award regionally in honor of **Dr. Arvern Moore** who was a charter member and past President of the Region IV Head Start Association. He also served multiple terms as President of the National Head Start Association. RIVHSA acknowledges his legacy of leadership to achieve distinction as powerful advocates for children and families.

#### General Information

- The nominee must have been enrolled in a Head Start/Early Head Start program as a student or parent for one or more years and must also be a current Head Start program employee for three or more years.
- RIVHSA will present the recipient with a commemorative plaque and \$100 award.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 6-7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA and NHTA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional or national category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHTA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

#### **Applying for the Award**

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The nominee must:

1. Qualification: The nominee must:
  - Have been enrolled in a Head Start/Early Head Start program as a student or parent for one or more years.
  - Be a current Head Start program employee for three or more years.
2. Cover Letter and Resume (80 points): Submit a supporting statement to address the following:
  - (20 points) Cover Letter – History/Connection: A description of the nominee's personal and family connection to Head Start, including demographic information, and history in the local community
  - (30 points) Cover Letter – Advocacy/Growth: Examples of advocacy, career growth, and involvement in the community at the state/national level to benefit Head Start families.
  - (30 points) Resume - Biographical Profile: Details of service history, including year started, positions held, etc.
3. Reference Letters (20 points): Provide two letters of reference from people who know the nominee in their current role.

# Celebrating Head Start Heroes

Revised March 2026

## NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION

### Aubrey Puckett Memorial Award

*Regionally known as the Dr. Arvern Moore Memorial Award*

Be sure to complete the form below in its entirety. All fields are required. Please type or print clearly.

**Nominee** (Provide the contact information for the actual nominee - do not use company information; do not use abbreviations)

Nominee		Date	
Position Title		Agency Hire Date	
Mailing Address of Nominee			
City		State	
			Zip Code
Primary Phone #		Other Phone #	
E-Mail			

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name			
Head Start or Early Head Start Director			
E-Mail			
Alternate Agency Contact for Awards Process			
E-Mail			
Grantee Mailing Address			
City		State	
			Zip Code
Telephone		Fax	

**Membership Information**

Category	Membership #
National Head Start Association	
Region IV Head Start Association	
Your State Head Start Association	

**Submission Checklist:** Check each box to indicate that required materials are attached.

- Application Form
- Alumni Status: Provide statement on company letterhead from the current program director verifying alumni status as a student (Start/end dates and program of enrollment) or parent (stating the nominee has a child currently enrolled).
- Employment Status: Provide statement on company letterhead from the current program director stating the hire date and employment status.
- Cover Letter
- Resume
- Reference Letters

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.
- **REGIONAL ASSOCIATION:** Submit regional recipients to NHSA for national competition by the filing deadline.

# Guidelines & Applications for RIVHSA Awards & Scholarships

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Revised March 2026

## NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION Vanessa Rich Leadership Award

### Overview

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This award honors the memory of **Vanessa Rich**, a former Head Start director, parent, and leader from Chicago who served as the chairwoman of the NHTA Board of Directors. The award is intended for a new director who is carrying on Vanessa's legacy of "Head Start doesn't stop on the front porch, it comes all the way into the house."

#### General Information

- The nominee must be a new Head Start or Early Head Start Director with three years or less experience.
- RIVHSA will present the recipient with a commemorative plaque and \$100 award.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 6-7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA and NHTA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional or national category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHTA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

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The nominee must:

1. Qualification: Document employment as a new Head Start or Early Head Start Director with three years or less experience.
2. Cover Letter and Resume (80 points): Submit a supporting statement to address the following:
  - (20 points) Cover Letter - Goals: How they intend to build the future for Head Start.
  - (30 points) Cover Letter – Advocacy/Growth: Activities and efforts made by the nominee that demonstrate passion for service, advocacy, career growth, and involvement with Head Start.
  - (30 points) Resume - Biographical Profile: Details of service history, including year started, positions held, etc.
3. Reference Letters (20 points): Provide two letters of reference from people who know the nominee in their current role.

# Celebrating Head Start Heroes

Revised March 2026

## NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION

### Vanessa Rich Leadership Award

Be sure to complete the form below in its entirety. All fields are required. Please type or print clearly.

**Nominee** (Provide the contact information for the actual nominee - do not use company information; do not use abbreviations)

Nominee		Date	
Position Title		Agency Hire Date	
Mailing Address of Nominee			
City		State	Zip Code
Primary Phone #		Other Phone #	
E-Mail			

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name			
Head Start or Early Head Start Director			
E-Mail			
Alternate Agency Contact for Awards Process			
E-Mail			
Grantee Mailing Address			
City		State	Zip Code
Telephone		Fax	

**Membership Information**

Category	Membership #
National Head Start Association	
Region IV Head Start Association	
Your State Head Start Association	

**Submission Checklist:** Check each box to indicate that required materials are attached.

- Application Form
- Employment Status: Provide statement on company letterhead from the current executive director stating the hire date as Head Start or Early Head Start Director and employment status.
- Cover Letter
- Resume
- Reference Letters

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.
- **REGIONAL ASSOCIATION:** Submit regional recipients to NHTA for national competition by the filing deadline.

# Guidelines & Applications for RIVHSA Awards & Scholarships

Revised March 2026

## NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION Ron Herndon Head Start Parent Scholarship

### Overview

This scholarship celebrates the legacy of **Ron Herndon**, a community activist, Head Start director, and past chairperson of the NHTA Board of Directors. The scholarship is intended for a Head Start parent who mobilizes others to create meaningful change in their programs and communities.

#### RIVHSA's William S. Fillmore Scholarship for Head Start Parents

RIVHSA renamed and recognizes the award regionally in honor of **William S. Fillmore** who served as the charter and first President of the Region IV Head Start Association. RIVHSA acknowledges his distinguished service as an officer and legacy as a Head Start and community advocate.

#### General Information

- The nominee must:
  - + Have a child enrolled in a Head Start or Early Head Start program
  - + Be a high school graduate or GED recipient
  - + Be accepted/enrolled at a two-year or four-year post-secondary institution whose accreditation is recognized by the U.S. Department of Education.
- NHTA will present the recipient with a commemorative certificate and one-time funds that may be applied to the documented cost of tuition or books.
- RIVHSA requires documentation by official transcript of a 2.5 minimum cumulative GPA prior to final confirmation as the declared winner. Once confirmed, RIVHSA will present the recipient with a commemorative plaque and one-time \$1000 award. A runner-up is selected in the event the recipient fails to meet the final verification steps.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 6-7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA and NHTA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional or national category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHTA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

The nominee must:

1. Qualification: Document: (1) Status as a parent of a child enrolled in a Head Start or Early Head Start; (2) High school graduate or GED status; (3) Acceptance/enrollment at a two-year or four-year institution with accreditation recognized by the U.S. Department of Education.
2. Supporting Statement (80 points): Submit a supporting statement to address the following:
  - (20 points) Biographical Profile: Details about the nominee, the nominee's family, and their connection to Head Start or Early Head Start.
  - (30 points) Goals: Personal education and professional goals
  - (30 points) Advocacy/Growth: Activities and mobilizing efforts contributed by the nominee that affected change in their local Head Start program or community
3. Reference Letters (20 points): Provide two letters of reference from people who know the nominee as a student and as a Head Start or Early Head Start parent.

# Celebrating Head Start Heroes

Revised March 2026

## NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION

### Ron Herndon Head Start Parent Scholarship

Be sure to complete the form below in its entirety. All fields are required. Please type or print clearly.

### Nominee

Nominee		Social Security #		Date	
Position Title				Agency Hire Date	
Mailing Address of Nominee					
City			State		Zip Code
Telephone			E-Mail		

### Nominating Grantee (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name					
Head Start or Early Head Start Director					
E-Mail					
Alternate Agency Contact for Awards Process					
E-Mail					
Grantee Mailing Address					
City			State		Zip Code
Telephone			Fax		

### Membership Information

Category	Membership #
National Head Start Association	
Region IV Head Start Association	
Your State Head Start Association	

### Submission Checklist: Check each box to indicate that required materials are attached.

- Application Form
- Parent Status: Provide statement on company letterhead from the current program director stating that the parent has a child currently enrolled in the program.
- Document Secondary Education Completion: Copy of high school diploma or GED recipient. If documents are unavailable, provide statement on company letterhead from the issuing institution stating dates of attendance and completion status.
- Student Status: Submit proof of acceptance or current enrollment in a two-year or four-year post-secondary institution. Submit both of the following documents: (1) Acceptance/Enrollment Verification Letter: Obtain from the registrar or office of admissions and must include student's full name, the school year, and status (full time or part time); (2) Class Schedule: Obtain from the registrar or office of admissions and must include student's name, the school's name, as well as the courses registered for in the current (most recent) semester.
- Supporting Statement
- Reference Letters

### Application Process

- **NOMINEE**: Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE**: Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION**: Submit state recipients to RIVHSA by the filing deadline.
- **REGIONAL ASSOCIATION**: Submit regional recipients to NHSA for national competition by the filing deadline.

# Guidelines & Applications for RIVHSA Awards & Scholarships

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Revised March 2026

## NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION Alumni Scholarship

### Overview

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This scholarship celebrates Head Start's proven model of success by recognizing outstanding student achievement and supporting alumni as they take the next step in their educational journey.

#### RIVHSA's Ernestine Smith Scholarship for Head Start Alumni

RIVHSA renamed and recognizes the award regionally in honor of **Ernestine Smith** who served as a charter officer and was the first female President of the Region IV Head Start Association. RIVHSA acknowledges her distinguished service as an officer and legacy as a Head Start and community advocate.

#### General Information

- The nominee must (1) have been enrolled in a Head Start/Early Head Start program as a student for one or more years; (2) Been accepted/enrolled at a two-year or four-year post-secondary institution whose accreditation is recognized by the U.S. Department of Education.
- NNSA will present the recipient with a commemorative certificate and one-time funds that may be applied to the documented cost of tuition or books.
- RIVHSA requires documentation by official transcript of a 2.5 minimum cumulative GPA prior to final confirmation as the declared winner. Once confirmed, RIVHSA will present the recipient with a commemorative plaque and one-time \$1500 award. A runner-up is selected in the event the recipient fails to meet the final verification steps.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 6-7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA and NNSA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional or national category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NNSA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

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The nominee must:

1. Qualification: Document: (1) Status as former student enrolled in a Head Start/Early Head Start program for one or more years; (2) High school graduate or GED status; (3) Acceptance/enrollment at a two-year or four-year post-secondary institution with accreditation recognized by the U.S. Department of Education.
2. Supporting Statement (80 points): Submit a supporting statement to address the following:
  - (20 points) Biographical Profile: Details about the nominee, the nominee's family, and their connection to Head Start or Early Head Start.
  - (30 points) Goals: Personal education and professional goals
  - (30 points) Advocacy/Growth: Activities and mobilizing efforts contributed by the nominee that affected change in their local Head Start program or community
3. Reference Letters (20 points): Provide three letters of reference - two from academic subject teachers who taught the nominee within the last two years and one from a civic/religious organization where the nominee is active.

# Celebrating Head Start Heroes

Revised March 2026

## NATIONAL CATEGORY – NATIONAL HEAD START ASSOCIATION

### Alumni Scholarship

Be sure to complete the form below in its entirety. All fields are required. Please type or print clearly.

**Nominee** (Provide the contact information for the actual nominee - do not use agency or staff information; do not use abbreviations)

Nominee		Date	
Mailing Address of Nominee			
City	State	Zip Code	
Primary Phone #	Other Phone #		
E-Mail			

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name				
Head Start or Early Head Start Director				
E-Mail				
Alternate Agency Contact for Awards Process				
E-Mail				
Grantee Mailing Address				
City	State	Zip Code		
Telephone	Fax			

**Membership Information**

Category	Membership #
National Head Start Association	
Region IV Head Start Association	
Your State Head Start Association	

**Submission Checklist:** Check each box to indicate that required materials are attached.

- Application Form
- Alumni Status: Provide statement on company letterhead from the current program director verifying alumni status as a student (Start/end dates and program of enrollment).
- Secondary Education Status: High school senior must provide statement on letterhead from the issuing institution stating expected graduation date and cumulative GPA.
- Student Status: Submit both of the following documents from the registrar or office of admissions at the post-secondary institution: (1) Enrollment Verification Letter - Must include student's full name, the school year, and status (full time or part time); (2) Class Schedule - Must include student's name, the school's name, as well as the courses registered for in the current (most recent) semester.
- Supporting Statement
- Reference Letters

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.
- **REGIONAL ASSOCIATION:** Submit regional recipients to NHTA for national competition by the filing deadline.

## Administrator of the Year Award

### Overview

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This award acknowledges the important contributions of forward-thinking administrators to the long-term success of Head Start/Early Head Start programs and, ultimately, the children and families they serve.

#### General Information

- The award recipient will receive a commemorative plaque and \$100 award.
- Applicant must serve in a position directly related to this year's emphasis area.
- The application must only describe the applicant's responsibilities in their current professional role.
- Applicant must be a program employee for at least one year with the nominating program.
- Applications must reflect services contributed during the specified program year as of June 30.
- Applicant must possess at least a bachelor's degree and submit proof of credentials.
- The local program must be a current agency member of RIVHSA.
- Applicant must be a current individual member of RIVHSA.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHSA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

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#### **Questionnaire (90 points)**

On a separate sheet, respond to each question in 500 words or less. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (10 points) Length or Service in the Program: What year did you start? What positions have you held?
2. (15 points) Training, Qualifications, and Credentials: At what level did you begin? What training appropriate to your position have you acquired? What credentials do you possess?
3. (15 points) Mobilization of Resources and Collaboration: List activities or projects in which you are (or have been) involved that demonstrate your ability to mobilize necessary resources to provide and enhance services to children and their families. Please include the size of your program.
4. (20 points) Quality and Provision of Services: Describe activities in your program or community that are unique and meet or surpass the Head Start Program Performance Standards.
5. (30 points) Special Contributions: Describe in 500 words or less (no more than two typewritten, double spaced pages) any special contributions you have made to the program that have had a positive impact on services on the total program. Please be very specific.

#### **Letters of Reference (10 points)**

Include three letters of reference. Each letter must be from different individuals who know you in the following capacities: supervisor, personally, or as a volunteer or community member. Judges will rate the overall effectiveness of the letters. Applications not including all three letters will not be considered.

# Celebrating Head Start Heroes

Revised March 2026

## Administrator of the Year Award

Be sure to complete the form below in its entirety.  
All fields are required. Please type or print clearly.

**RIVHSA recognizes recipients each February at the Awards Gala.**

**Please mark the award presentation year (See page 7):**

- 2027: Director - Head Start or Early Head Start
- 2028: Grantee Executive Director
- 2029: Center Director - Head Start or Early Head Start
- 2030: Assistant or Deputy Director - Head Start or Early Head Start

**For Administrative Use Only:**

\_\_\_\_\_ Local Program Director  
*initial here before submitting to the state association.*

\_\_\_\_\_ State Association President  
*initial here before submitting to RIVHSA*

**Nominee** (Provide the contact information for the actual nominee - do not use agency or staff information; do not use abbreviations)

Nominee		Date	
Position Title			
Agency Hire Date		Hire Date in Current Position	
State	Program Member #	Individual Member #	
Mailing Address of Nominee			
City	State	Zip Code	
Primary Phone#		Other Phone #	
E-mail			

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name			
Head Start or Early Head Start Director			
E-Mail			
Alternate Agency Contact for Awards Process			
E-Mail			
Grantee Mailing Address			
City	State	Zip Code	
Telephone		Fax	

**Submission Checklist:** Check each box to indicate that required materials are attached.

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> <u>Application Form</u></li> <li><input type="checkbox"/> <u>Proof of highest post-secondary degree completed</u><br/>(e.g. copy of degree or transcript)</li> <li><input type="checkbox"/> <u>Reference Letters</u></li> </ul> | <p><u>Statements:</u></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Length or Service in the Program</li> <li><input type="checkbox"/> Training, Qualifications, and Credentials</li> <li><input type="checkbox"/> Mobilization of Resources and Collaboration</li> <li><input type="checkbox"/> Quality and Provision of Services</li> <li><input type="checkbox"/> Special Contributions</li> </ul> |
|---|---|

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.

# Guidelines & Applications for RIVHSA Awards & Scholarships

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## Teacher of the Year Award

### Overview

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This award recognizes exemplary teachers who have strong long-range potential for leadership and the ability to inspire a love of learning in young children. This honor was established to elevate the status of the teaching profession at the state and regional levels by creating opportunities for recognizing the most accomplished members of the profession.

#### General Information

- The award recipient will receive a commemorative plaque and \$100 award.
- Applicant must serve in a position directly related to this year's emphasis area.
- The application must only describe the applicant's responsibilities in their current professional role.
- Applicant must be a program employee for at least one year with the nominating program.
- Applications must reflect services contributed during the specified program year as of June 30.
- Applicant must possess at least an associate degree and submit proof of credentials.
- The local program must be a current agency member of RIVHSA.
- Applicant must be a current individual member of RIVHSA.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHSA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

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#### **Questionnaire** (90 points)

On a separate sheet, respond to each question in 500 words or less. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (10 points) Length or Service in the Program: What year did you start? What positions have you held?
2. (15 points) Training, Qualifications, and Credentials: At what level did you begin? What training appropriate to your position have you acquired? What credentials do you possess?
3. (15 points) Mobilization of Resources and Collaboration: List activities or projects in which you are (or have been) involved that demonstrate your ability to mobilize necessary resources to provide and enhance services to children and their families. Please include the size of your program.
4. (20 points) Quality and Provision of Services: Describe activities in your program or community that are unique and meet or surpass the Head Start Program Performance Standards.
5. (30 points) Special Contributions: Describe in 500 words or less (no more than two typewritten, double spaced pages) any special contributions you have made to the program that have had a positive impact on services on the total program. Please be very specific.

#### **Letters of Reference** (10 points)

Include three letters of reference. Each letter must be from different individuals who know you in the following capacities: supervisor, personally, or as a volunteer or community member. Judges will rate the overall effectiveness of the letters. Applications not including all three letters will not be considered.

# Celebrating Head Start Heroes

Revised March 2026

## Teacher of the Year Award

Be sure to complete the form below in its entirety.  
All fields are required. Please type or print clearly.

**For Administrative Use Only:**

\_\_\_\_\_ Local Program Director  
*initial here before submitting to the state association.*

\_\_\_\_\_ State Association President  
*initial here before submitting to RIVHSA*

**Nominee** (Provide the contact information for the actual nominee - do not use agency or staff information; do not use abbreviations)

Nominee		Date	
Position Title			
Agency Hire Date		Hire Date in Current Position	
State		Program Member #	Individual Member #
Mailing Address of Nominee			
City		State	Zip Code
Primary Phone#		Other Phone #	
E-mail			

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name			
Head Start or Early Head Start Director			
E-Mail			
Alternate Agency Contact for Awards Process			
E-Mail			
Grantee Mailing Address			
City		State	Zip Code
Telephone		Fax	

**Submission Checklist:** Check each box to indicate that required materials are attached.

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> <u>Application Form</u></li> <li><input type="checkbox"/> <u>Proof of highest post-secondary degree completed</u><br/>(e.g. copy of degree or transcript)</li> <li><input type="checkbox"/> <u>Reference Letters</u></li> </ul> | <p><u>Statements:</u></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Length or Service in the Program</li> <li><input type="checkbox"/> Training, Qualifications, and Credentials</li> <li><input type="checkbox"/> Mobilization of Resources and Collaboration</li> <li><input type="checkbox"/> Quality and Provision of Services</li> <li><input type="checkbox"/> Special Contributions</li> </ul> |
|---|---|

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.

## Staff of the Year Award

### Overview

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This award recognizes the significant contributions and extraordinary dedication of professional staff in the fulfillment of the organization's mission and established goals.

#### General Information

- The award recipient will receive a commemorative plaque and a \$100 award.
- Applicant must serve in a position directly related to this year's emphasis area.
- The application must only describe the applicant's responsibilities in their current professional role.
- Applicant must be a program employee for at least one year with the nominating program.
- Applications must reflect services contributed during the specified program year as of June 30.
- Applicant must possess at least an associate degree and submit proof of credentials.
- The local program must be a current agency member of RIVHSA.
- Applicant must be a current individual member of RIVHSA.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHTSA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

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#### **Questionnaire (90 points)**

On a separate sheet, respond to each question in 500 words or less. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (10 points) Length or Service in the Program: What year did you start? What positions have you held?
2. (15 points) Training, Qualifications, and Credentials: At what level did you begin? What training appropriate to your position have you acquired? What credentials do you possess?
3. (15 points) Mobilization of Resources and Collaboration: List activities or projects in which you are (or have been) involved that demonstrate your ability to mobilize necessary resources to provide and enhance services to children and their families. Please include the size of your program.
4. (20 points) Quality and Provision of Services: Describe activities in your program or community that are unique and meet or surpass the Head Start Program Performance Standards.
5. (30 points) Special Contributions: Describe in 500 words or less (no more than two typewritten, double spaced pages) any special contributions you have made to the program that have had a positive impact on services on the total program. Please be very specific.

#### **Letters of Reference (10 points)**

Include three letters of reference. Each letter must be from different individuals who know you in the following capacities: supervisor, personally, or as a volunteer or community member. Judges will rate the overall effectiveness of the letters. Applications not including all three letters will not be considered.

# Celebrating Head Start Heroes

Revised March 2026

## Staff of the Year Award

Be sure to complete the form below in its entirety.  
All fields are required. Please type or print clearly.

**RIVHSA recognizes recipients each February at the Awards Gala.**  
**Please mark the award presentation year (See page 7):**

2027: Early Childhood Development/Health: Nutrition Emphasis

2028: Parent, Family, and Community Engagement

2029: Early Childhood Development/Health: Mental Health Emphasis

2030: Early Childhood Development/Health: Early Care & Learning Emphasis

**For Administrative Use Only:**  
 \_\_\_\_\_ Local Program Director  
*initial here before submitting to the state association.*  
 \_\_\_\_\_ State Association

**Nominee** (Provide the contact information for the actual nominee - do not use agency or staff information; do not use abbreviations)

Nominee		Date	
Position Title			
Agency Hire Date		Hire Date in Current Position	
State		Program Member #	Individual Member #
Mailing Address of Nominee			
City		State	Zip Code
Primary Phone#		Other Phone #	
E-mail			

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name			
Head Start or Early Head Start Director			
E-Mail			
Alternate Agency Contact for Awards Process			
E-Mail			
Grantee Mailing Address			
City		State	Zip Code
Telephone		Fax	

**Submission Checklist:** Check each box to indicate that required materials are attached.

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> <u>Application Form</u></li> <li><input type="checkbox"/> <u>Proof of highest post-secondary degree completed</u><br/>(e.g. copy of degree or transcript)</li> <li><input type="checkbox"/> <u>Reference Letters</u></li> <li><input type="checkbox"/></li> </ul> | <p><u>Statements:</u></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Length or Service in the Program</li> <li><input type="checkbox"/> Training, Qualifications, and Credentials</li> <li><input type="checkbox"/> Mobilization of Resources and Collaboration</li> <li><input type="checkbox"/> Quality and Provision of Services</li> <li><input type="checkbox"/> Special Contributions</li> </ul> |
|---|---|

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.

## Support Staff of the Year Award

### Overview

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This award recognizes the significant contributions and extraordinary dedication of support staff in the fulfillment of the organization's mission and established goals.

#### General Information

- The award recipient will receive a commemorative plaque and \$100 award.
- Applicant must serve in a position directly related to this year's emphasis area.
- The application must only describe the applicant's responsibilities in their current professional role.
- Applicant must be a program employee for at least one year with the nominating program.
- Applications must reflect services contributed during the specified program year as of June 30.
- Applicant must possess at least an associate degree and submit proof of credentials.
- The local program must be a current agency member of RIVHSA.
- Applicant must be a current individual member of RIVHSA.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHSA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

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#### **Questionnaire (90 points)**

On a separate sheet, respond to each question in 500 words or less. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (10 points) Length or Service in the Program: What year did you start? What positions have you held?
2. (15 points) Training, Qualifications, and Credentials: At what level did you begin? What training appropriate to your position have you acquired? What credentials do you possess?
3. (15 points) Mobilization of Resources and Collaboration: List activities or projects in which you are (or have been) involved that demonstrate your ability to mobilize necessary resources to provide and enhance services to children and their families. Please include the size of your program.
4. (20 points) Quality and Provision of Services: Describe activities in your program or community that are unique and meet or surpass the Head Start Program Performance Standards.
5. (30 points) Special Contributions: Describe in 500 words or less (no more than two typewritten, double spaced pages) any special contributions you have made to the program that have had a positive impact on services on the total program. Please be very specific.

#### **Letters of Reference (10 points)**

Include three letters of reference. Each letter must be from different individuals who know you in the following capacities: supervisor, personally, or as a volunteer or community member. Judges will rate the overall effectiveness of the letters. Applications not including all three letters will not be considered.

# Celebrating Head Start Heroes

Revised March 2026

## Support Staff of the Year Award

Be sure to complete the form below in its entirety.  
All fields are required. Please type or print clearly.

**RIVHSA recognizes recipients each February at the Awards Gala.**  
**Please mark the award presentation year (See page 7):**

2027: Transportation Services  
 2028: Administrative Support  
 2029: Classroom Support  
 2030: Facility Services

**For Administrative Use Only:**

\_\_\_\_\_ Local Program Director  
*initial here before submitting to the state association.*

\_\_\_\_\_ State Association President  
*initial here before submitting to RIVHSA*

**Nominee** (Provide the contact information for the actual nominee - do not use agency or staff information; do not use abbreviations)

Nominee					Date		
Position Title							
Agency Hire Date				Hire Date in Current Position			
State			Program Member #			Individual Member #	
Mailing Address of Nominee							
City				State		Zip Code	
Primary Phone#				Other Phone #			
E-mail							

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name							
Head Start or Early Head Start Director							
E-Mail							
Alternate Agency Contact for Awards Process							
E-Mail							
Grantee Mailing Address							
City				State		Zip Code	
Telephone				Fax			

**Submission Checklist:** Check each box to indicate that required materials are attached.

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> <u>Application Form</u></li> <li><input type="checkbox"/> <u>Proof of highest post-secondary degree completed</u><br/>(e.g. copy of degree or transcript)</li> <li><input type="checkbox"/> <u>Reference Letters</u></li> </ul> | <p><u>Statements:</u></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Length or Service in the Program</li> <li><input type="checkbox"/> Training, Qualifications, and Credentials</li> <li><input type="checkbox"/> Mobilization of Resources and Collaboration</li> <li><input type="checkbox"/> Quality and Provision of Services</li> <li><input type="checkbox"/> Special Contributions</li> </ul> |
|---|---|

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.

## Achievement Award: Disability Services Coordinator

### Overview

This award recognizes exceptional performance in the delivery of services to children with disabilities and supporting parents in their role as advocates for their children.

### General Information

- The award recipient will receive a commemorative plaque and \$100 award.
- Applicant must be a Head Start/Early Head Start Coordinator of Disability Services or in a combined position responsible for disability services.
- The application must only describe the applicant's responsibilities in their current professional role.
- Applicant must be a program employee for at least one year with the nominating program.
- Applications must reflect services contributed during the specified program year as of June 30.
- Applicant must have credentials beyond a high school diploma; minimum of an associate degree.
- The local program must be a current agency member of RIVHSA.
- Applicant must be a current individual member of RIVHSA.

### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHTSA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

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#### Questionnaire (90 points)

On a separate sheet, respond to each question in 500 words or less. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (10 points) Length or Service in the Program: What year did you start? What positions have you held?
2. (15 points) Training, Qualifications, and Credentials: At what level did you begin? What training appropriate to your position have you acquired? What credentials do you possess?
3. (15 points) Mobilization of Resources and Collaboration: List activities or projects in which you are (or have been) involved that demonstrate your ability to mobilize necessary resources to provide and enhance services to children and their families. Please include the size of your program.
4. (20 points) Quality and Provision of Services: Describe activities in your program or community that are unique and meet or surpass the Head Start Program Performance Standards.
5. (30 points) Special Contributions: Describe in 500 words or less (no more than two typewritten, double spaced pages) any special contributions you have made to the program that have had a positive impact on services on the total program. Please be very specific.

#### Letters of Reference (10 points)

Include three letters of reference. Each letter must be from different individuals who know you in the following capacities: supervisor, personally, or as a volunteer or community member. Judges will rate the overall effectiveness of the letters. Applications not including all three letters will not be considered.

# Celebrating Head Start Heroes

Revised March 2026

## Achievement Award: Disability Services Coordinator

Be sure to complete the form below in its entirety.  
All fields are required. Please type or print clearly.

**For Administrative Use Only:**

\_\_\_\_\_ Local Program Director  
*initial here before submitting to the state association.*

\_\_\_\_\_ State Association President  
*initial here before submitting to RIVHSA*

**Nominee** (Provide the contact information for the actual nominee - do not use agency or staff information; do not use abbreviations)

Nominee		Date	
Position Title			
Agency Hire Date		Hire Date in Current Position	
State		Program Member #	Individual Member #
Mailing Address of Nominee			
City		State	Zip Code
Primary Phone#		Other Phone #	
E-mail			

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name			
Head Start or Early Head Start Director			
E-Mail			
Alternate Agency Contact for Awards Process			
E-Mail			
Grantee Mailing Address			
City		State	Zip Code
Telephone		Fax	

**Submission Checklist:** Check each box to indicate that required materials are attached.

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> <u>Application Form</u></li> <li><input type="checkbox"/> <u>Proof of highest post-secondary degree completed</u><br/>(e.g. copy of degree or transcript)</li> <li><input type="checkbox"/> <u>Reference Letters</u></li> </ul> | <p><u>Statements:</u></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Length or Service in the Program</li> <li><input type="checkbox"/> Training, Qualifications, and Credentials</li> <li><input type="checkbox"/> Mobilization of Resources and Collaboration</li> <li><input type="checkbox"/> Quality and Provision of Services</li> <li><input type="checkbox"/> Special Contributions</li> </ul> |
|---|---|

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.

## Oral Health Award

### Overview

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This award recognizes exceptional leadership and commitment toward improving the oral health of children and their families.

#### General Information

1. The award recipient will receive a commemorative plaque and \$250 grant award to support oral health activities at their local program.
2. Applicant must be a Head Start/Early Head Start program that sufficiently outlines how this award will be used to promote oral health practices in the classroom, including parent involvement and utilization of Colgate's Bright Smiles, Bright Futures program.
3. The local program must be a current agency member of RIVHSA.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHTSA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

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#### **Questionnaire** (100 points)

1. (20 points) Need: Describe the current oral health activities in your local programs, the size of your program, and discuss the need to enhance your present efforts.
2. (30 points) Activities: Describe what activities you plan to implement with the help of this award and the benefit students will receive from these activities.
3. (10 points) Bright Smiles, Bright Futures: Discuss how the Bright Smiles, Bright Futures program will be utilized as part of your programming efforts.
4. (20 points) Parent Involvement: Describe how parents will be involved in oral health activities and the benefits they will receive from changes to the program's oral health practices.
5. (20 points) Program Goals: Outline your program's short-term and long-term goals as they pertain to oral health practices in your program.

# Celebrating Head Start Heroes

Revised March 2026

## Oral Health Award

Be sure to complete the form below in its entirety.  
All fields are required. Please type or print clearly.

**For Administrative Use Only:**

\_\_\_\_\_ Local Program Director  
*initial here before submitting to the state association.*

\_\_\_\_\_ State Association President  
*initial here before submitting to RIVHSA*

**Nominated Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name					
Head Start or Early Head Start Director					
E-Mail					
Alternate Agency Contact for Awards Process					
E-Mail					
Grantee Mailing Address					
City		State		Zip Code	
Telephone		Fax			

**Submission Checklist:** Check each box to indicate that required materials are attached.

Application Form

Statements:

- Need
- Activities
- Bright Smiles, Bright Futures
- Parent Involvement
- Program Goals

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.

## Beating the Odds Award

### Overview

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This award recognizes a Head Start/Early Head Start parent who has overcome significant challenges on the journey to self-sufficiency.

#### General Information

- The award recipient will receive a commemorative plaque and \$100 award.
- Applicant must be a Head Start/Early Head Start parent and not a paid employee.
- Applicant must have volunteered in the Head Start/Early Head Start program.
- The local program must be a current agency member of RIVHSA.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHSA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

---

#### **Questionnaire** (90 points)

On a separate sheet, respond to each question in 500 words or less. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (10 points) Positions: List any positions held by the individual (i.e. center committee, policy council) and the number of volunteer hours contributed in the specified program year.
2. (30 points) Self-Sufficiency: Describe how the individual has overcome obstacles, persevered through hardships, and taken steps toward self-sufficiency.
3. (20 points) Career Advancement: Describe the steps the individual has taken or participation in programs that has led toward career advancement.
4. (30 points) Personal and Professional Goals: Describe the individual's goals/aspirations for their career, education and future.

#### **Letters of Reference** (10 points)

Include three letters of reference. Each letter must be from different individuals who know you in the following capacities: professionally, personally, or as a volunteer or community member. Judges will rate the overall effectiveness of the letters. Applications not including all three letters will not be considered.

# Celebrating Head Start Heroes

Revised March 2026

## Beating the Odds Award

Be sure to complete the form below in its entirety.  
All fields are required. Please type or print clearly.

**For Administrative Use Only:**

\_\_\_\_\_ Local Program Director  
*initial here before submitting to the state association.*

\_\_\_\_\_ State Association President  
*initial here before submitting to RIVHSA*

**Nominee** (Provide the contact information for the actual nominee - do not use agency or staff information; do not use abbreviations)

Nominee					Date		
State			Program Member #			Individual Member #	
Mailing Address of Nominee							
City				State			Zip Code
Primary Phone#				Other Phone #			
E-mail							

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name							
Head Start or Early Head Start Director							
E-Mail							
Alternate Agency Contact for Awards Process							
E-Mail							
Grantee Mailing Address							
City				State			Zip Code
Telephone				Fax			

**Submission Checklist:** Check each box to indicate that required materials are attached.

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> <u>Application Form</u></li> <li><input type="checkbox"/> <u>Reference Letters</u></li> </ul> | <p>Statements</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Indicate actual years nominee was Head Start parent.</li> <li><input type="checkbox"/> Indicate whether the nominee was a paid employee during the specified program year.</li> <li><input type="checkbox"/> Positions</li> <li><input type="checkbox"/> Self-Sufficiency</li> <li><input type="checkbox"/> Career Advancement</li> <li><input type="checkbox"/> Personal and Professional Goals</li> </ul> |
|---|---|

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.

## Parent of the Year Award

### Overview

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This award honors a Head Start/Early Head Start father who has demonstrated the ability to serve as a role model for his children and to make a positive difference in the community.

#### General Information

- The award recipient will receive a commemorative plaque and \$100 award.
- Applicant must be a Head Start/Early Head Start parent and not a paid employee.
- Applicant must have volunteered in the Head Start/Early Head Start program.
- The local program must be a current agency member of RIVHSA.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHSA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

---

#### **Questionnaire** (90 points)

On a separate sheet, respond to each question in 500 words or less. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (10 points) Positions: List any positions held by the individual (i.e. center committee, policy council) and the number of volunteer hours contributed in the specified program year.
2. (30 points) Self-Sufficiency: Describe how the individual has overcome obstacles, persevered through hardships, and taken steps toward self-sufficiency.
3. (30 points) Career advancement: Describe the steps the individual has taken or participation in programs that has led toward career advancement.
4. (30 points) Personal and Professional Goals: Describe the individual's goals/aspirations for their career, education and future.

#### **Letters of Reference** (10 points)

Include three letters of reference. Each letter must be from different individuals who know you in the following capacities: professionally, personally, or as a volunteer or community member. Judges will rate the overall effectiveness of the letters. Applications not including all three letters will not be considered.

# Celebrating Head Start Heroes

Revised March 2026

## Parent of the Year Award

Be sure to complete the form below in its entirety.  
All fields are required. Please type or print clearly.

**For Administrative Use Only:**

\_\_\_\_\_ Local Program Director  
*initial here before submitting to the state association.*

\_\_\_\_\_ State Association President  
*initial here before submitting to RIVHSA*

**Nominee** (Provide the contact information for the actual nominee - do not use agency or staff information; do not use abbreviations)

Nominee				Date		
State			Program Member #			Individual Member #
Mailing Address of Nominee						
City				State		
Primary Phone#				Other Phone #		
E-mail						

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name						
Head Start or Early Head Start Director						
E-Mail						
Alternate Agency Contact for Awards Process						
E-Mail						
Grantee Mailing Address						
City				State		
Telephone				Fax		

**Submission Checklist:** Check each box to indicate that required materials are attached.

- Application Form
- Reference Letters

Statements:

- Indicate actual years nominee was Head Start parent.
- Indicate whether the nominee was a paid employee during the specified program year.
- Positions
- Self-Sufficiency
- Career Advancement
- Personal and Professional Goals

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.

# Guidelines & Applications for RIVHSA Awards & Scholarships

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## Father of the Year Award

### Overview

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This award honors a Head Start/Early Head Start father who has demonstrated the ability to serve as a role model for his children and to make a positive difference in the community.

#### General Information

- The award recipient will receive a commemorative plaque and \$100 award.
- Applicant must be a Head Start/Early Head Start father and not a paid employee. The Program Performance Standards 1305.2(2) definition of a father will be adhered to.
- Nominee must model increased educational involvement and personal responsibility in the lives of his own children
  - as well as improved personal development resulting from his Head Start/Early Head Start experience.
- The local program must be a current agency member of RIVHSA.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHSA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

---

#### **Questionnaire (90 points)**

On a separate sheet, respond to each question in 500 words or less. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (20 points) Volunteering: Describe the ways the individual has volunteered or worked in the program.
2. (20 points) Participation: Describe the program activities he participated in with his child or children.
3. (30 points) Development: Describe how the fatherhood program has helped him develop.
4. (20 points) Personal: Describe why he should be selected as the Father of the Year. Please be very specific.

#### **Letters of Reference (10 points)**

Include three letters of reference.

1. Two letters must be from people who know the individual as a program volunteer and/or fatherhood program participant.
2. The third letter may be personal. Judges will rate the overall effectiveness of the letters. Applications not including all three letters will not be considered.

# Celebrating Head Start Heroes

Revised March 2026

## Father of the Year Award

Be sure to complete the form below in its entirety.  
All fields are required. Please type or print clearly.

**For Administrative Use Only:**

\_\_\_\_\_ Local Program Director  
*initial here before submitting to the state association.*

\_\_\_\_\_ State Association President  
*initial here before submitting to RIVHSA*

**Nominee** (Provide the contact information for the actual nominee - do not use agency or staff information; do not use abbreviations)

Nominee				Date		
State			Program Member #			Individual Member #
Mailing Address of Nominee						
City				State		
Primary Phone#				Other Phone #		
E-mail						

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name						
Head Start or Early Head Start Director						
E-Mail						
Alternate Agency Contact for Awards Process						
E-Mail						
Grantee Mailing Address						
City				State		
Telephone			Fax			

**Submission Checklist:** Check each box to indicate that required materials are attached.

- Application Form
- Reference Letters

**Statements:**

- Indicate actual years nominee was Head Start parent.
- Indicate whether the nominee was a paid employee during the specified program year.
- Volunteering
- Participation
- Development
- Personal

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.

## Humanitarian of the Year Award

### Overview

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This award was established to recognize an individual who utilizes their resources and leadership to achieve positive outcomes in their community and help Head Start/Early Head Start children and their families.

#### General Information

- The award recipient will receive a commemorative plaque and \$100 award.
- Nominee must be an individual or organization that made a voluntary contribution of time and effort, without regard to religious or ethnic affiliation, that has had a positive impact upon children, families and/or communities.
- The local program must be a current agency member of RIVHSA.
- The contribution must have occurred within, or in preparation for the school year specified above.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHSA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

---

#### **Questionnaire** (100 points)

On a separate sheet, respond to each question in 500 words or less. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (20 points) Need: Describe the situation before the contribution was made.
2. (30 points) Activities: Describe the nominee's activities that met this need, include length of time this person has been involved in this activity and the scope of volunteer services provided.
3. (30 points) Results: Describe the positive results of the nominee's activities, who benefited, and how.
4. (10 points) Enhancement: Support this nomination with letters from interested individuals or organizations. If available, include news reports or other documentation about the contribution.
5. (5 points) Biographical Sketch: Describe family, education, hobbies, interests, employment, and anything else you feel is appropriate and that give a broad picture of the nominee, but especially those items relevant to the award. This should be more than 300 words (one typewritten, double spaced page)
6. (5 points) Vantage: Briefly describe the vantage point from which you observed the nominee's contribution. This should be no more than 300 words (on typewritten, double spaced page)

# Celebrating Head Start Heroes

Revised March 2026

## Humanitarian of the Year Award

Be sure to complete the form below in its entirety.  
All fields are required. Please type or print clearly.

**For Administrative Use Only:**

\_\_\_\_\_ Local Program Director  
*initial here before submitting to the state association.*

\_\_\_\_\_ State Association President  
*initial here before submitting to RIVHSA*

**Nominee** (Provide the contact information for the actual nominee - do not use agency or staff information; do not use abbreviations)

Nominee		Date	
State	Program Member #	Individual Member #	
Mailing Address of Nominee			
City	State	Zip Code	
Primary Phone#	Other Phone #		
E-mail			

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name			
Head Start or Early Head Start Director			
E-Mail			
Alternate Agency Contact for Awards Process			
E-Mail			
Grantee Mailing Address			
City	State	Zip Code	
Telephone	Fax		

**Submission Checklist:** Check each box to indicate that required materials are attached..

Application Form

Statements:

- Need
- Activities
- Results
- Enhancement
- Biographical Sketch
- Vantage

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.

## Corporate Award

### Overview

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This award was established to recognize a corporation that utilizes their resources and leadership to help Head Start/Early Head Start children and their families as well as to promote positive outcomes in their community.

#### General Information

- The award recipient will receive a commemorative plaque.
- Nominee must be a corporation that demonstrates commitment to the goals and objectives of Head Start/Early Head Start and/or promote special projects that benefit poor children and their families.
- The local program must be a current agency member of RIVHSA.

#### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHTSA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

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#### **Essay (100 points)**

On a separate sheet, respond to each question in 500 words or less (no more than one typewritten, double-spaced page). The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (100 points) Special contributions: Describe the special contribution(s) this company makes that impact the program, children, and families. Be sure to describe how this company's contributions help fulfill the goals and objectives of the program as outlined below.

#### **About Head Start and Early Head Start**

Established in 1965, Head Start is a national program that provides comprehensive child development services to economically disadvantaged children and families, with a special focus on helping preschoolers develop the early reading and math skills they need to be successful in school. Head Start promotes school readiness by enhancing the social and cognitive development of children through the provision of educational, health, nutritional, social and other services to enrolled children and families.

In FY 1995, the Early Head Start (EHS) program was established to serve children from birth to three years of age in recognition of the mounting evidence that the earliest years matter a great deal to children's growth and development. EHS promotes healthy prenatal outcomes, enhances the development of infants and toddlers, and promotes healthy family functioning. Its mission is to promote healthy prenatal outcomes for pregnant women, enhance the development of very young children, and to promote healthy family functioning.

# Celebrating Head Start Heroes

Revised March 2026

## Corporate Award

Be sure to complete the form below in its entirety.  
All fields are required. Please type or print clearly.

**For Administrative Use Only:**

\_\_\_\_\_ Local Program Director  
*initial here before submitting to the state association.*

\_\_\_\_\_ State Association President  
*initial here before submitting to RIVHSA*

**Nominee** (Provide the contact information for the actual nominee - do not use agency or staff information; do not use abbreviations)

Company		Date	
Contact Person			
Position Title			
State		Program Member #	Individual Member #
Mailing Address of Nominee			
City		State	Zip Code
Primary Phone#		Other Phone #	
E-mail			

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name			
Head Start or Early Head Start Director			
E-Mail			
Alternate Agency Contact for Awards Process			
E-Mail			
Grantee Mailing Address			
City		State	Zip Code
Telephone		Fax	

**Submission Checklist:** Check each box to indicate that required materials are attached.

- Application Form
- Essay

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.

## Scholarship for Head Start/Early Head Start Staff, Higher Education

### Overview

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This scholarship is designed to recognize a Head Start/Early Head Start staff person who is making significant contributions to their local program and community and to encourage their continuing education at an institution of higher learning. The scholarship recipient will receive a commemorative plaque and is eligible to receive a one-time scholarship award of \$1000 towards the attainment of an undergraduate degree at an institution of higher learning. The recipient must send RIVHSA proof of eligibility (acceptance or enrollment at an institution of higher learning, class schedule and 2.5 cumulative GPA) to receive the scholarship award. A runner-up is selected in the event the recipient is determined ineligible or fails to comply with verification guidelines.

### General Information

1. Applicant must be a current employee of a Head Start/Early Head Start grantee.
2. The local program must be a current agency member of RIVHSA.
3. Applicant must be a current individual member of RIVHSA.
4. Applicant must submit proof of acceptance or enrollment in an institution of higher learning.

### General Rules and Regulations

- State affiliates must submit state nominees to RIVHSA by the **July 15** filing deadline. RIVHSA only accepts nominations by postal mail (e.g. we do not accept courier deliveries – FedEx, UPS). Please contact your state association for state deadlines. Failure to meet any of the criteria will result in automatic elimination. See complete guidelines on [pages 7](#).
- All scholarship and award applications must reflect services contributed during the specified program year.
- Grantees and state affiliates must be current RIVHSA members. Some award/scholarship types require individual membership. Non-member applications will not be considered.
- Applicant may not be nominated for more than one regional category per year.
- All criteria for an award or scholarship must be met. Incomplete applications will not be considered. Nominees will be contacted primarily via email.
- Individuals selected for an award or scholarship must be able to provide required information to redeem cash awards.
- Applicant must be willing to allow RIVHSA or NHSA to publicize their nomination.
- RIVHSA is not responsible for travel or other expenses associated with recipient attendance at the awards ceremony.

### Applying for the Award

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#### Questionnaire (70 points)

On a separate sheet, respond to each question in 500 words or less. The maximum point value is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (30 points) Financial need: Include a brief statement of the need for financial assistance.
2. (40 points) Professional Development Goals: Write a statement of professional development goals for furthering your education and how degree attainment will advance the priorities and initiatives at your local Head Start/Early Head Start program.

#### Letters of Reference (30 points)

Include three letters of reference from people who can verify the nominee's work, volunteer service, and other activities. Letters will be judged on specific information and should be no longer than one typewritten page. Judges will rate the overall effectiveness of the letters. Applications that do not include all three references will not be considered for this award.

# Celebrating Head Start Heroes

Revised March 2026

## Scholarship for Head Start/Early Head Start Staff, Higher Education

Be sure to complete the form below in its entirety.  
All fields are required. Please type or print clearly.

**For Administrative Use Only:**

\_\_\_\_\_ Local Program Director  
*initial here before submitting to the state association.*

\_\_\_\_\_ State Association President  
*initial here before submitting to RIVHSA*

**Nominee** (Provide the contact information for the actual nominee - do not use agency or staff information; do not use abbreviations)

Nominee		Date	
Position Title			
Agency Hire Date		Hire Date in Current Position	
State		Program Member #	Individual Member #
Mailing Address of Nominee			
City		State	Zip Code
Primary Phone#		Other Phone #	
E-mail			

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Agency Name			
Head Start or Early Head Start Director			
E-Mail			
Alternate Agency Contact for Awards Process			
E-Mail			
Grantee Mailing Address			
City		State	Zip Code
Telephone		Fax	

**Submission Checklist:** Check each box to indicate that required materials are attached.

- Application Form
- Proof of acceptance at or enrollment in an institution of higher learning
- Letters of reference
- Statement 1 - Financial Need
- Statement 2 - Professional Development Goals

**Application Process**

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.