**Nomination for PROFFORMANCE International Teacher Award Call 2021/22**

**Recommendation by superior**

I, undersigned,

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| --- |
| Name: |
| Institution name: |
| Organization unit: |
| Position at the institution: |
| Email address: |

as a superior and authorized person of the applicant mentioned below, recommend the following good practice to participate in the PROFFORMANCE International Teacher Award Call.

**Applicants’s data**

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| --- |
| ACRONYM of good practice: |
| Title of good practice: |
| Contact person: |
| Position: |
| Institution: |
| Faculty and department/institute: |
| Participants: |

**I certify the following. Both conditions are compulsory for application.**

* The applicant is officially (contract, assignment, etc.) involved in teaching tasks at the institution named above.
* The presented good practice has been implemented
* in the frame of a regular or irregular programme at the institution named above,
* after September 2018 and has proven results.

Date: ……………………………………. Signature: ……………………………………….

**Webpage of the call:** [**https://profformance.eu/call-for-application**](https://profformance.eu/call-for-application)

**Remark: This document is needed to be filled out, officially signed and stamped by an authorized superior, for participation at the PROFFORMANCE International Teacher Award Call.**