

Children's Museum of Brownsville

# Educator of the Month

Nominate your teacher for Educator of the Month

Teacher's Name: \_\_\_\_\_

School and District: \_\_\_\_\_

Grade Level: \_\_\_\_\_

He/She is a special teacher because...

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Rellenny Munguia  
Education Director

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\*\*\*\*\*PLEASE FILL IN ALL INFORMATION\*\*\*\*\*

To be filled in by Parent and Student:

Parent's Name \_\_\_\_\_ Student's Name \_\_\_\_\_

Contact Number \_\_\_\_\_ E-mail Address \_\_\_\_\_

\*Selected teacher will receive a certificate, CMB family pass and their picture on our website and in the Museum.