



Attachment A3

2026 GOAL NOMINATION FORM

Student's Name: _____	ID #: _____
College: _____	County of Residence: _____
Program of Study: _____	Entry Date: _____
Date of Graduation: _____	Cell Phone Number: (____) _____
Student's College Email: _____	
Student's Personal Email: _____	

ELIGIBILITY VERIFICATION:

Please indicate eligibility by checking **YES** or **NO** for each item:

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	(1) Student recognizes technical education's critical impact on Georgia's economy, demonstrates strong work ethic, loyalty, and enthusiasm for promoting technical education.
<input type="checkbox"/>	<input type="checkbox"/>	(2) Student is in "good standing" as determined by the college and free of any BANNER "holds."
<input type="checkbox"/>	<input type="checkbox"/>	(3) Student will remain enrolled in the same program during all phases of the GOAL process (nomination, selection, and state-level competition).
<input type="checkbox"/>	<input type="checkbox"/>	(4) Student has a cumulative GPA of at least 3.0 ("B" average) and has completed at least 12 semester hours at the nominating college (must include most recent Fall semester).
<input type="checkbox"/>	<input type="checkbox"/>	(5) Student has a Work Ethics grade average of "2" or higher (if applicable). Mark NA if Work Ethics grades do not apply at your college.
<input type="checkbox"/>	<input type="checkbox"/>	(6) Student is at least 18 years of age, a U.S. citizen, holds a valid driver's license, and has car insurance (required if named state winner).
<input type="checkbox"/>	<input type="checkbox"/>	(7) Student is NOT a full-time employee of the college or system office.
<input type="checkbox"/>	<input type="checkbox"/>	(8) Student has no known history of acts involving dishonesty or moral turpitude.
<input type="checkbox"/>	<input type="checkbox"/>	(9) Student has not participated in regional or state-level GOAL competition before.

NOTE: Official transcript with Fall Semester grades must be attached.

INSTRUCTOR EVALUATION:

(Refer to Attachment D for Definitions of Traits)

Rate each trait on a scale of 1 (Low) to 5 (High):

Personal Traits:	Low				High
	1	2	3	4	5
Good Moral Character					
Attitude					
Attendance					
Leadership					
Personal Appearance					
Career Goals					
Commitment to / Knowledge of Occupation					
Extracurricular Activities					
Sub Totals					
Total Score (Max. 40 pts.)					

OTHER QUALIFICATIONS:

Nominating Instructor: Submit a **letter of recommendation** addressed to the college president (on college letterhead) describing why your outstanding student should be the State GOAL Winner to be included in the winner's information folders. (Refer to p.12)

Students: Submit Winner's Questionnaire and bio to college coordinator. Coordinator should include bio in the Winner's Information Folders, and the questionnaire should be saved to the official OneDrive folder. (See Attachments B1 and B2 for guidelines.)

NOMINATION VERIFICATION: I hereby nominate the above-named student as a GOAL candidate.

Nominating Instructor's Name (Print): _____

Nominating Instructor's Signature: _____

Email: _____ **Date:** ____/____/20____

COLLEGE CERTIFICATION: (To be completed by the administrative office or president's office. The GOAL Coordinator **should not sign this section, even if eligible**).

I certify that the above student is in good standing with this college and meets all eligibility requirements of the GOAL program.

Name: _____ **Title:** _____

Email: _____

Signature: _____

GOAL COORDINATOR SECTION:

GOAL Coordinator: _____ **Date & Time Received:** _____