



National Association of Rocketry

Application for Robert L. Cannon Education Award

Name of Applicant:		Phone:
Address:		Email Address:
City:	State:	Zip Code:
Name of School:		Position:
Address:		Phone:
City:	State:	Zip Code:
You may apply each year for the Cannon award. Please fill out sections below that may have changed. It is not necessary to resubmit your lesson materials. Sign and date the application.		
I have previously applied for the Cannon award Yes No		
Please explain on a separate page how you use model rocketry. You may attach a classroom schedule, lesson plan summary, or other material. If you wish, you may email this information to smcnabb@ec.rr.com Please indicate your choice below ___ Included with this application or ___ Emailed on: _____		
How many years have you used rockets in your classroom: <input type="checkbox"/> 0-1 years <input type="checkbox"/> 1-2 years <input type="checkbox"/> 2-4 years <input type="checkbox"/> More than 4 years		
How many students are involved in your activity: <input type="checkbox"/> 0-25 students <input type="checkbox"/> 26-50 students <input type="checkbox"/> 51-100 students <input type="checkbox"/> more than 100 students		
Is your rocketry program part of your regular classroom activities or conducted as a before or after school activity: <input type="checkbox"/> conducted as part of the regular classroom activities <input type="checkbox"/> conducted as a before or after school activity <input type="checkbox"/> some of both		
At what time of year do you usually conduct your rocketry activity? (semester or month) <input type="checkbox"/> fall semester <input type="checkbox"/> spring semester <input type="checkbox"/> Month		
Has your school administration or a parent ever expressed any reservations about the safety of model rocketry? <input type="checkbox"/> Yes, they've asked safety-related questions. <input type="checkbox"/> No, they've not asked about safety related questions.		
Had you ever heard of the NAR before you found out about the Cannon Award? <input type="checkbox"/> Yes, I was familiar with your organization. <input type="checkbox"/> I'm a member of the NAR; NAR # _____ <input type="checkbox"/> No, I'd never heard of the NAR before.		
Has your school administration or a parent ever asked you to obtain insurance coverage for model rocketry? <input type="checkbox"/> Yes, they've asked me to obtain insurance coverage. <input type="checkbox"/> No, they've not asked to obtain insurance.		
The Cannon award will be made out to your school. If additional disbursement instructions are needed, please indicate here.		
The Cannon award(s) will be presented annually at the Association's annual meet, (NARAM), usually held the first week of August at various locations around the United States. You need not be present to receive the award. By signing this application, you agree to submit an article for publication in Sport Rocketry magazine within 6 months of receipt of the award. If necessary, our magazine staff will be happy to assist you with the article.		
Signature:		Date:

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Instructions for completing Robert L. Cannon Education Award

Bob Cannon was the educational director of Estes Industries in Penrose CO. Upon his death in 1992, a memorial fund was established to provide funds to educators who use model rocketry in a hands-on program of classroom teaching. The fund is supported by both private donations and the National Association of Rocketry. Currently, the awards are presented at the NAR's annual meet, held late July or early August.

There are three general requirements for receiving the Cannon award:

- 1. You must be an educator, qualified to teach in your state.**
- 2. You must have an activity in place – this cannot be your first experience with model rocketry.**
- 3. You must be willing to submit an article for publication in the NAR member magazine, Sport Rocketry, within 6 months of receipt of your award. If necessary, our magazine staff will be happy to assist you with the article. The article can be about a past activity. (If you are a multiple award recipient, this requirement is waived.)**

Please complete each part of the application. If more space is needed, use the back of the application or an additional sheet of paper. If a question does not apply, please indicate NA.

Please provide a class synopsis, lesson plan summary or other information to show us how you use model rocketry in the classroom or as a learning activity outside of the classroom. This need not be a lengthy presentation; we just want to know how you are using rocketry to teach youth. If you wish, you may email the requirement and the completed application to the committee chairman.

We are required to issue the grant to your institution. Please indicate any special disbursement instructions in the space indicated.

You do not need to be present at the Association's annual meeting to receive the award.

You will be notified in writing if your grant application is approved.

Applications received after May 1 will be reviewed for the subsequent year. For example, an application received July 20, 2005 will be considered for the August, 2006 presentation.

Mail your completed application to:
National Association of Rocketry
Cannon Educational Award
P.O. Box 407
Marion, IA 52302

If you have additional questions or need more information, please contact:

Stew McNabb, Scholarship Committee Chair
209 Lee Rogers Rd.
Hubert, NC 28539

Email: smcnabb@ec.rr.com