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# 15<sup>th</sup> District PTA Sharon Whitworth Advocacy Award

**Deadline: March 15, 2019 (Postmark Date "Fax" or "Scan" copies are not acceptable.)**

**Mail this form to: 15<sup>th</sup> District PTA, P.O. Box 35444, Louisville, Ky 40232**

Please Copy this Form and Distribute to the Appropriate Person to Complete.

**The Nominee must be a member of a PTA/PTSA "In GOOD STANDING" as of October 15<sup>th</sup>, 2018**

You may also apply for this award online at [http://15<sup>th</sup>districtpta.org/programs/awards/](http://15thdistrictpta.org/programs/awards/)

**Eligibility:**

1. The Nominee must meet the dictionary definition of an Advocate: "a person who publicly supports or recommends a particular cause or policy."
2. The Nominee is not required to be a parent or to have children in school.

Name of Nominee (Please Print): \_\_\_\_\_

Address: \_\_\_\_\_  
Street/P.O. Box City State Zip

Grade(s), Age(s), or Area(s) Served: \_\_\_\_\_ Name of School: \_\_\_\_\_

Type of School: \_\_\_\_\_ Preschool \_\_\_\_\_ Elementary \_\_\_\_\_ Middle \_\_\_\_\_ High \_\_\_\_\_ Other

Name of PTA/PTSA President: \_\_\_\_\_

Daytime Telephone: (\_\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Signature of PTA/PTSA President: \_\_\_\_\_

**SHARON WHITWORTH ADVOCACY AWARD CRITERIA:**

- 1 Duration of Service: 10 points
  - 1.1 Approximate Hours of Weekly Advocacy: \_\_\_\_
  - 1.2 Year of Advocacy Service: \_\_\_\_
- 2 Type and quality of Advocacy service: 30 points
  - 2.1 Emphasize the Advocacy provide to the student(s), parents, and school(s)
- 3 Impact of Advocacy service on the students and community: 40 points
  - 3.1 Describe the positive changes in student and parent Advocacy efforts; or behavior; describe the overall contribution to the students, school, and community.
- 4 Recommendations (two required): 20 points
  - 4.1 This could include recommendations from other PTA/PTSA members, administrators, staff, teachers, students, or community members; include name, title, and phone number of person submitting the recommendations.

**To be a Unit in GOOD STANDING All PTAs/PTSAs Must:**

- Send at least one national and Ky PTA State dues payment (\$3.50 per member) to the Kentucky PTA office no later than October 15<sup>th</sup>
- Send district dues to district treasurer or Ky PTA office as required
- Send the PTA financial review form to the Ky PTA office and school principal by July 15<sup>th</sup>
- File 990 IRS Tax Form by November 15<sup>th</sup> and mail a copy to the Ky PTA office
- Send bylaws to the Ky PTA office for approval every 5 years

Please attach page(s) addressing the above criteria.

Limit: Five pages (including this form) one side only, double space, 12-point font.

If you have any questions regarding this award, contact: [Bkingery07@gmail.com](mailto:Bkingery07@gmail.com) or

[15thdistrictpta.president@gmail.com](mailto:15thdistrictpta.president@gmail.com)