



Northwest Cook Region/District 37 Local Unit Honor Award

TO 2015-2016 LOCAL UNIT PRESIDENTS: This is your chance to show off the great things your PTA did this past year. Every local unit is eligible to be considered for a Northwest Cook Region Honor Award and recognition at the Annual Meeting on October 17, 2016 after submitting this application on time and if they fall within the top responding PTAs based on the answers given below.

Please fill out as much information as you can. If there is information that is left blank, your PTA will still be considered for an award. Do not feel everything must be perfect; this also acts as a way for you to view the success of your PTA last year and gain ideas of what you might want to do this upcoming year. Each answer you provide can add points to your total score, you do not need to be able to answer all questions in order to submit your application. We greatly appreciate you sharing your information with us.

Instructions (you may also request a Word Document version from Mikel):

- Be sure you have the most current version of Adobe Acrobat on your computer
- Download Honor Award file to your computer
- Re-open file from your computer
- Fill out the application- Click "Fill and Sign" in the upper right corner of your screen; then click "Add text" and click your cursor on the location where you want to add text.
- Each text box will allow you 1000 characters
- If necessary, you may use multiple text boxes for essay questions
- When complete, click "Save As"
- Type your PTA name into the beginning of the file name
- Click Save

Applications must be received by Region Director, Mikel Eppenbaugh, **NO LATER THAN AUGUST 16, 2016.** Application may be emailed to mikel@ilpta-d37.org, mailed or dropped off to:

Mikel Eppenbaugh
1250 Rosedale Lane
Hoffman Estates, IL 60169

Contact Mikel via email at mikel@ilpta-d37.org.

PTA UNIT: _____

LOCAL UNIT PRESIDENT (2015-2016): _____

1. REGISTRATION

The local unit PTA registration form was received by Illinois PTA on or before May 15, 2016.

Yes _____ No _____

NOTE: The registration form must have been received by the State Office on or before May 15, even if your officers have not been elected. Updates or changes can be made at a later date. Both mail and online registrations are date stamped.

2. MEMBERSHIP

Your local unit's first membership dues payment was received by the Illinois PTA State Office in Springfield postmarked on or before October 1, 2015.

Date first dues were submitted to the State Office: _____

Please submit the following membership information:

2014-2015 Membership _____

2015-2016 Membership _____

2015-2016 Community Members _____

2015-2016 Faculty Members _____

2015-2016 Full Time Faculty in Building _____

(PTA defines faculty as full time certified staff only. All other staff are community members. If you do not know the exact numbers for the faculty numbers, you can leave that blank – your application will still be considered.)

2. MEMBERSHIP *(continued)*

How did your PTA promote membership to parents this year? *(letters, fliers, e-mails, newsletters, social media, etc.)*

How did your PTA promote membership to the Community (not parents or staff)? *(promoted to extended family members, community officials/leaders, school board members, etc. - via letters, e-mail, promotion at community events, etc.)*

How did your PTA promote membership to Faculty?

3. LEADERSHIP DEVELOPMENT

Please list any and all members that have completed any of the following PTA courses after May 2015 in preparation for the 2015-2016 school year: PTA 101: Road to Success Course, Presidents Course, Council Course, Money Matters 101, and Money Matters 201. **PLEASE LIST THE MEMBER'S NAME, COURSE TITLE, and DATE TAKEN:**

4. REPRESENTATION

Were representatives from your PTA in attendance for these 2015-2016 events:

- | | | | | | | |
|-------------------------------------------------|---------------------|-----|-----|-----|----|-----|
| a. D37 Packet Orientation (Aug. 2015) | number attended | ___ | Yes | ___ | No | ___ |
| b. District 37 Annual Meeting (Cotillion 10/19) | number attended | ___ | Yes | ___ | No | ___ |
| c. Illinois PTA State Convention (Springfield) | number attended | ___ | Yes | ___ | No | ___ |
| d. Council General Meetings (if applicable) | number attended | ___ | Yes | ___ | No | ___ |
| e. Participated in Reflections Program | number participants | ___ | Yes | ___ | No | ___ |

5. SCHOLARSHIP

Made a contribution to the *Illinois PTA Scholarship Fund* through the purchase of the following:

- | | | | | | | |
|-----------------------------------|------------------|-----|-----|-----|----|-----|
| Life Membership | number purchased | ___ | Yes | ___ | No | ___ |
| Book of Recognition | number purchased | ___ | Yes | ___ | No | ___ |
| Distinguished Service Scroll | number purchased | ___ | Yes | ___ | No | ___ |
| T.H.A.N.K.S. Donation | number purchased | ___ | Yes | ___ | No | ___ |
| Achievement Award | number purchased | ___ | Yes | ___ | No | ___ |
| Educator of the Year Award | number purchased | ___ | Yes | ___ | No | ___ |
| In Memoriam Cards | number purchased | ___ | Yes | ___ | No | ___ |
| Illinois PTA Scholarship Donation | number purchased | ___ | Yes | ___ | No | ___ |
| Other | specify | | | | | |

6. BYLAWS

Your PTA reviewed bylaws this year or last year and sent a copy to the Region Director for approval. Region Director must have a copy on file. This includes returning the signature page with all appropriate signatures.

Date of Director's Approval:

7. PTA PURPOSES

- To promote the welfare of children and youth in home, school, places of worship, and throughout the community.
- To advocate for laws that further the education, health, welfare and safety of children and youth.
- To raise the standards of home life.
- To advocate for fiscal responsibility regarding public tax dollars in public education funding;
- To promote the collaboration and engagement of families and educators in the education of children and youth; and
- To engage the public in united efforts to secure the physical, mental, emotional, spiritual, and social well-being of all children and youth.

List one PTA Purpose and describe a project or program that your PTA implemented to support the PTA Purpose this past year. Must be a project or program (NOT A FUNDRAISER) done INDEPENDENTLY by your unit – **not in conjunction with your Council or District.**

a. PTA PURPOSE Promoted:

b. Describe project or program that supported this PTA Purpose: *(use back side if needed)*

8. PROGRAM

Describe ONE program or project (not a fundraiser, whether it made a profit or not) that your PTA sponsored this past year, of which you were most proud- **not in conjunction with a Council or District. PLEASE DO NOT REPEAT QUESTION 7.** *(use back side if needed)*

9. ADVOCACY

Did your PTA do anything to advance legislation or otherwise advocate for your students...

For instance:

- a. Did you publish legislative articles in newsletters to promote advocacy?

Yes _____ No _____

If yes, please list topics covered and attach issue. (*examples: state budget, energy drinks, concussions, etc.*)

- b. Has your PTA done anything to implement or put into practice a resolution adopted by the Illinois PTA? (*Prevention of Asphyxiation Games/Choking Game, Energy Drinks and Young Adults Involved in the Justice System*)

Yes _____ No _____

If yes, describe what action was taken.

- c. Did your PTA promote advocacy by submitting a resolution to Illinois PTA?

Yes _____ No _____

- d. Did your PTA participate in any other legislative programs to advocate for children?

Yes _____ No _____

If yes, please explain. (*examples: worked with school and/or local leaders to advocate for children on topics such as education, health & safety, legislation, etc.*)

Completed by:

Title:

Date: