**Missouri PTA Student Membership Award**

MAIL TO: Missouri PTA State Office, 2101 Burlington St., Columbia, MO 65202 DEADLINE: Applications must be postmarked by September 1, 2016

**DUES must be postmarked to the state office by March 1, 2017 to be counted for awards.**

Secondary school PTSAs are encouraged to enroll students as members and to promote active participation in all aspects of the PTSA.

The PTSA which achieves the greatest success, based on the percentage of total school enrollment, will earn the “Student Membership Award”. It will be necessary to differentiate between adult and student members on the membership roster.

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| Unit in good standing | Bylaws approval date |  |
|  | Unit Annual Financial Review by December 1st.  |  |
|  | Fiscal Year-End Report submitted by December 1st. |  |
|  | Copy of required IRS tax form submitted by December 1st.  |  |
|  | Officers form submitted to state office by March 31st. |  |
|  | Membership dues mailed to state office each month |  |

Faculty includes all certified teaching staff (i.e. teachers, librarians, counselors, and administrative staff) who are assigned to your school on a FULL TIME basis.

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| --- | --- |
| Unit Name |  |
| School District |  |
| PTA Region |  | County |  |
| City |  | President’s Email |  |
| President’s Name |  | President’s Phone |  |
| President’s Address |  | City/Zip |  |

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| --- | --- | --- | --- | --- | --- |
| \*\*School Enrollment |  | Number of Full Time Faculty Employees |  | Student Membership Total |  |
|  | Students serve as members of the executive committee. |
|  | Students are active participants in the work of our PTSA. |

We certify that our PTSA’s total paid membership includes dues for student members representing % of the school’s total enrollment.

\*\*NOTE: Current year’s total school enrollment as provided by the building principal or secretary or from DESE. *Combined units’ enrollment will be defined as the number of students in grades eligible for PTSA membership.*

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| President’s Signature | Date |
|  |  |
| Membership Chairman’s Signature | Date |
|  |  |
| Principal’s Signature | Date |
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