



Parent Education & Engagement Award Information

MAIL TO: Missouri PTA, PO Box 30545, Columbia, MO 65205

DEADLINE: Application must be postmarked on or before August 31

The Parent Education and Engagement Award is awarded to local units and/or councils in the state of Missouri **who effectively organize, plan and hold a program, project, specific workshop, or event which educates and/or celebrates parent engagement in the school.** The program may have been held during the previous school year or scheduled to be held during the current school year. Units may submit award applications for more than one event if desired.

All or a portion of the available funds will be awarded to the unit(s) and/or council(s) who conduct the most effective program based on merit of the program and the project budget.

To be considered for the award, your unit must be "a unit in good standing" per the following criteria:

- Bylaws approval date _____
- Unit Annual Financial Review, fiscal year-end report and required IRS tax form submitted to state office by December 1st _____
- Officers Form submitted to state office by March 31st _____
- Membership dues mailed to state office each month. _____
- Council: Council fee submitted to state office by December 1st _____

Unit/Council Award recipient(s) will be awarded at the Missouri State PTA Convention. Award winners may be offered the opportunity to share their program during a workshop at the Missouri State PTA Convention.

The following **MUST** be submitted to be considered:

- Brief description and summary of your workshop/program/event
- List of your goals and objectives in holding the activity
- Budget indicating how award funds will be used or will reimburse event expenses (preferably itemized)
- Method of evaluating the activity post-event. How did or will you determine the program's success?

In addition, you may include any other materials that further explain your activity and show how families, students, committee members, school staff, and / or your community were or will be involved.

Name of local unit or council _____

President's Name _____ Phone _____

President's Address _____

City, State, Zip _____

E-mail address _____

Name of Submitter (if other than President) _____ Phone _____

Address _____ City _____ Zip _____

E-mail Address _____

If chosen as an award recipient, would your unit like to present a program at the Missouri State PTA Convention?

Yes _____ No _____ Do not know _____