The members of the school board play an important role in the success of local unit PTAs. A good working partnership between PTA and the school board can improve family engagement and child and youth advocacy. Tell us how your nominee demonstrates their support of the PTA purposes and what makes him or her outstanding.

**Award Criteria**

- Application forms must be complete and received by the Tennessee PTA no later than March 1st.
- Nominee must be a member of a PTA/PTSA in Tennessee.
- A descriptive narrative in addition with a limit of 500 words must include:
  - How the school board member strengthens the partnership between the school and the community.
  - How the school board member strengthens the partnership between the PTA/PTSA and the school board.
  - Past or present PTA/PTSA service.
  - How the school board member participates in PTA/PTSA activities, events, and programs in addition to attendance at regular meetings.
  - How the school board member promotes the PTA purposes. (Listed below)
  - How the school board member has advocated for PTAs within the school district.
  - Any additional information to support the nominee.

**PTA Purposes**

To promote the welfare of children and youth in home, school, places of worship, and throughout the community;

To raise the standards of home life;

To advocate for laws that further the education, physical and mental health, welfare, and safety of children and youth;

To promote the collaboration and engagement of families and educators in the education of children and youth;

To engage the public in united efforts to secure the physical, mental, emotional, spiritual, and social well-being of all children and youth; and

To advocate for fiscal responsibility regarding public tax dollars in public education funding

**Winners will:**
Receive recognition at the annual Tennessee PTA meeting.
OUTSTANDING SCHOOL BOARD MEMBER
Award Information and Application

Name of School Board Member ________________________________________________
Name of School District ____________________________________________________
Number of Years as a Board Member __________________________________________
Member at ____________________________________________________________ PTA/PTSA
Name of PTA/Council _______________________________________________________
Name of PTA President _____________________________________________________
Name of Person Submitting Application _______________________________________
Email ____________________________ Phone Number ___________________________

Does the administrator participate in PTA/PTSA activities in the following? (Circle one)

<table>
<thead>
<tr>
<th>Activity</th>
<th>Regularly</th>
<th>Occasionally</th>
<th>Never</th>
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</thead>
<tbody>
<tr>
<td>Attends local PTA unit meetings</td>
<td></td>
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<tr>
<td>Attends Council meetings (if applicable)</td>
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<tr>
<td>Attends PTA Regional meetings and/or training</td>
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<tr>
<td>Attends State PTA Convention</td>
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<tr>
<td>Attends National PTA Convention</td>
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</tbody>
</table>

This application plus the descriptive narrative must be received by the Tennessee PTA no later than March 1st.
Tennessee PTA
P.O. Box 1536
Hixson, TN 37343

FOR OFFICE USE ONLY

Received Date ___________________________ □ Narrative Included

Good Standing Status
Number of Members Submitted as of December 1 __________________________

Date of Bylaws Approval __________________________
☐ 990 Submitted
☐ Audit Submitted