

## **YOUTH HUMANITARIAN AWARD ~ IN MEMORY OF STANLEY MARCUS**

**CHECKLIST:** (Check off the items as you complete them.) These items must be included and filled completely. Failure to complete any of the items will disqualify your entry.

- \_\_\_\_\_ Candidate's name, address and telephone number (including area code)
- \_\_\_\_\_ Grade in school (check one - Junior or Senior)
- \_\_\_\_\_ High School name and address
- \_\_\_\_\_ Principal's name, telephone number (including area code), and signature
- \_\_\_\_\_ PTA/PTSA unit information with president's signature to acknowledge the PTA is a unit in good standing
- \_\_\_\_\_ Selection committee information and chairman's signature
- \_\_\_\_\_ Student list of volunteer activities
- \_\_\_\_\_ \*Student Statement

\*The applicant's essay, "*Why Humanitarianism Is Important In My Life*" must be **typed** on page provided.

Your application must not include the following items: High School transcripts or academic letters of recommendation. Academic achievement is not a factor in the selection process.

Applications may include: letters from directors of community programs and copies of certificates of appreciation.

The completed application must be sent to your PTA Region Director, postmarked (not metered), by **January 31, 2012**. Faxed or e-mailed applications will not be accepted.

### **CRITERIA FOR CHOOSING A NOMINEE**

The nominee must be:

- A junior or senior at a high school with a PTA/PTSA in good standing.
- Chosen for outstanding volunteer community service and for having displayed humanitarian principles by word and deed.
- Selected for the quality of humanitarian activities rather than for the quantity of extra-curricular activities.

### **UNIT SELECTION PROCESS**

In order to participate, the PTA/PTSA High School must be in good standing on the date the application is submitted. This means that:

1. Membership dues have been received by the New York State PTA Office.
2. Insurance payment has been received by the New York State PTA Office.
3. Bylaws are current (3 years or less since last approval).

The local selection committee should be comprised of representatives from the PTA/PTSA, administration, faculty and students. The application **MUST BE** signed by the chairman of the selection committee.

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## APPLICATION FORM

### CANDIDATE AND SCHOOL INFORMATION:

Candidate's Name \_\_\_\_\_ Tel. No. (\_\_\_\_) \_\_\_\_\_

Candidate's Address \_\_\_\_\_

City/Town \_\_\_\_\_, New York Zip Code \_\_\_\_\_

Candidate is Junior \_\_\_\_\_ Senior \_\_\_\_\_

At the \_\_\_\_\_ High School

Address of School \_\_\_\_\_

City/Town \_\_\_\_\_, New York Zip Code \_\_\_\_\_

Name of Principal \_\_\_\_\_ Tel. No. (\_\_\_\_) \_\_\_\_\_

Signature of Principal \_\_\_\_\_

### PTA UNIT INFORMATION:

Name of PTA/PTSA Unit in Good Standing \_\_\_\_\_

Unit Code Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Name of Unit President \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_, New York Zip Code \_\_\_\_\_

Signature of Unit President \_\_\_\_\_

### PTA UNIT AWARD SELECTION COMMITTEE INFORMATION:

Name of Chairman \_\_\_\_\_ Tel. No. (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_, New York Zip Code \_\_\_\_\_

Signature of Chairman \_\_\_\_\_ Date \_\_\_\_\_

#### FOR OFFICE USE ONLY

BYLAWS  INSURANCE  MEMBERSHIP  INITIALS \_\_\_\_\_

Completed applications with attachments must be postmarked, not metered, by **January 31, 2012** to be considered. Faxed or emailed copies will not be accepted.

## **YOUTH HUMANITARIAN AWARD ~ IN MEMORY OF STANLEY MARCUS**

### ***"Why Humanitarianism Is Important In My Life"***

Explain why you participate in community service activities and how this has affected your life. You may note activities as part of your statement, but use the separate sheet provided on page 4 to list all community service in which you have been involved. If a handicapping condition precludes a typed statement, an audio tape will be accepted.

**ESSAY MUST BE TYPED ONLY IN THE SPACE BELOW. ADDITIONAL SHEETS WILL NOT BE ACCEPTED.**

