



## **Advocate for Children Award**

**Purpose:** *To recognize individuals who demonstrate a commitment to the Mission and Values of PTA by strengthening and encouraging advocacy for all children.*

**Criteria:** *Selection is based on the nominees':*

- *Actions that show commitment to the Mission and Values of PTA*
- *Active efforts showing dedication to advocating for children and youth, whether it be in the home, the school, their community, or at the state or national level*

*Nominees will be judged solely on their own efforts, and will not be held in comparison to other nominees.*

**Eligibility:** *Nominees can be (but not limited to):*

- *Local/Council PTA/PTSA members*
- *School Board members*
- *City Council members*
- *Mayors, superintendents, the governor, etc*

**Submission Guidelines:** *Nominations must consist of:*

- *Award nomination form (see attached)*
- *Nominating letter (not more than 1 page, front and back) detailing the nominee's dedication and commitment to child advocacy, citing specific examples (newsletter or newspaper articles concerning the nominee may also be included)*
- *Name and phone number of one other PTA member, signifying their support of this candidate*
- *Nominations must come from a local PTA, council PTA, or Oregon PTA*
- *Self-nominations will not be accepted*

**Submission Deadline:** *March 16, 2018*

**Award:** *The recipient will receive an engraved plaque, which, if recipient is present, will be presented at the Oregon PTA Conference and Convention.*

**Note:** *The Oregon PTA Awards Committee shall choose the recipient(s) of this award from among the nominations received by the due date. Although the committee may receive nominations, a recipient is not necessarily guaranteed each year.*



## Advocate for Children Award Nomination Form

Name of Candidate \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip Code \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Email Address \_\_\_\_\_

Will this person be attending the Oregon PTA Annual Conference and Convention?

Yes \_\_\_\_\_ No \_\_\_\_\_

Category PTA Member \_\_\_\_\_ Non PTA Member \_\_\_\_\_

Your Name \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Email Address \_\_\_\_\_

Will you be attending the upcoming Oregon PTA Convention?

Yes \_\_\_\_\_ No \_\_\_\_\_

Name & phone number of another PTA member that supports this candidate

Name	Phone Number

Please attach a nominating letter detailing the candidate's dedication and commitment, citing specific examples.

Send this form and your nominating letter to:

Oregon PTA  
 Attn.: Awards Committee  
 4506 SE Belmont, Suite 108B  
 Portland, OR 97215

**ALL NOMINATIONS MUST BE  
 RECEIVED AT THE OREGON PTA  
 OFFICE BY MARCH 16, 2018**