

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, telephone number (including area code) and email address
- ____ Grade in school (check one - Junior or Senior)
- ____ High School name and address
- ____ Principal's name, telephone number (including area code), email address and signature
- ____ PTA/PTSA unit information with president's signature and email address to acknowledge the PTA is a unit in good standing
- ____ Selection committee information and chair'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.

Note: Please do not include high school transcripts or academic letters of recommendation with this application. 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, and postmarked, not metered, by **January 31, 2018**. Faxed or emailed 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
- demonstrate outstanding volunteer community service
- display humanitarian principles by word and deed
- be selected for the quality of the humanitarian activities rather than for the quantity of extracurricular 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 paid
2. Insurance has been paid
3. Bylaws are current (3 years or less since last approval)

Each PTA/PTSA may submit one 11th or 12th grade student for this recognition.

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

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APPLICATION FORM

CANDIDATE AND SCHOOL INFORMATION:

Candidate's Name _____ Tel. No. (____) _____

Candidate's Address _____ Email: _____

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 _____ Email: _____

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 _____ Email: _____

PTA UNIT AWARD SELECTION COMMITTEE INFORMATION:

Name of Chair _____ Tel. No. (____) _____

Address _____

City/Town _____, New York Zip Code _____

Signature of Chair _____ Date _____

FOR OFFICE USE ONLY

BYLAWS INSURANCE MEMBERSHIP INITIALS _____

Completed applications with attachments must be postmarked, not metered by **January 31, 2018** to be considered. Faxed or emailed copies will not be accepted.

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"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.

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LIST OF VOLUNTEER COMMUNITY SERVICE WITH A DESCRIPTION OF THE ACTIVITIES

Please do not include school sports activities. Remember that the quality, not the quantity, of the humanitarian work is what the selection committee will be judging. Additional sheets may be used if necessary.

VOLUNTEER ACTIVITY

Please include length of time involved in the activity

PLEASE NOTE: Supportive materials such as letters from directors of community organizations you volunteered for or copies of certificates of appreciation received for your service may be attached. Academic letters of recommendation or high school transcripts should not be included and will not be accepted.