

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. **APPLICATIONS MUST BE SUBMITTED BY A HIGH SCHOOL PTA, PTSA, OR SEPTA UNIT.**

- Candidate's name, address, telephone number (including area code) and email address
- Grade in school (check one: Junior 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 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 the 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, by either email or by mail, postmarked, not metered, by **January 31, 2023**. Faxed 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:

- Membership dues have been paid
- Insurance has been paid
- 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 chairman of the selection committee.



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APPLICATION FORM

CANDIDATE AND SCHOOL INFORMATION:

Candidate's Name: _____ Tel. No. _____

Email: _____

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 _____ Email: _____

PTA UNIT INFORMATION:

Name of PTA/PTSA Unit in Good Standing: _____

Unit Code: ____ - ____

Name of Unit President: _____

Unit President Address: _____

City/Town: _____ New York Zip Code: _____

Signature of PTA President: _____ Email: _____

PTA UNIT AWARD SELECTION COMMITTEE INFORMATION:

Name of Chairman: _____ Tel. No. _____

Address: _____

City/Town: _____ New York Zip Code: _____

Signature of Chairman _____ Date: _____

Completed applications with attachments must be postmarked, not metered, or emailed to Region Director by **January 31, 2023** to be considered. Faxed copies will not be accepted.

FOR OFFICE USE ONLY

BYLAWS INSURANCE MEMBERSHIP INITIALS _____

