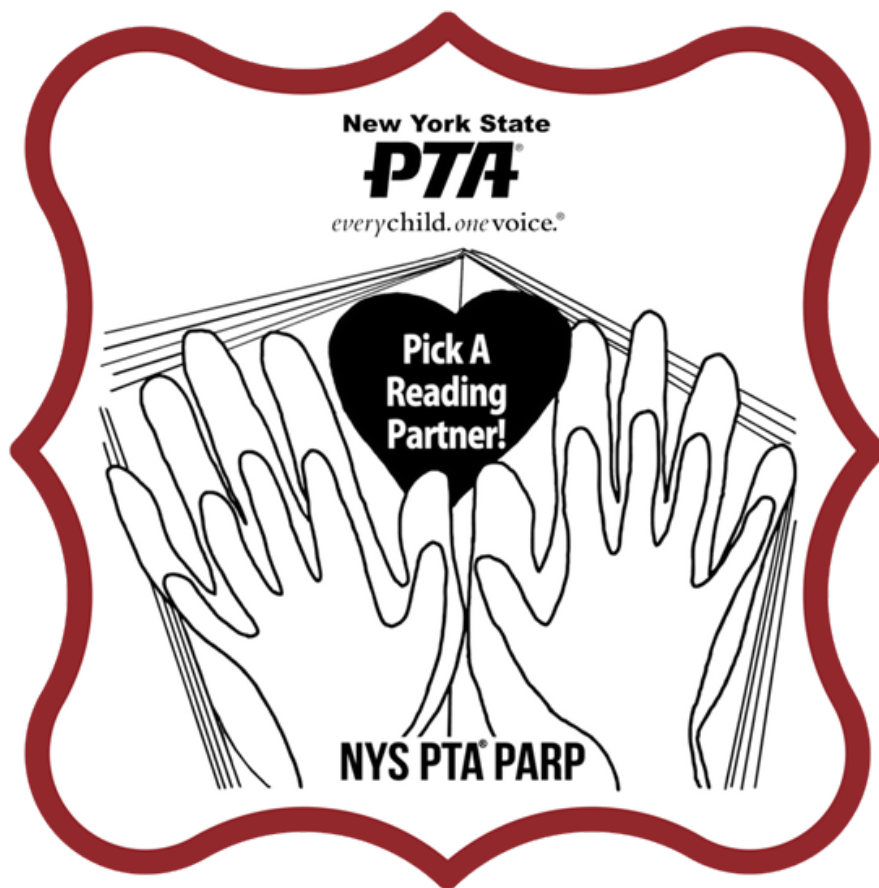


# **INSTRUCTIONS**

The completed PARP Award Application may include up to 15 pages of supportive materials. Instructions for the maximum points that may be awarded for each category are in the bolded section below. All instructions must be followed, or the application will be disqualified.

*One state winner shall receive a plaque and a check for \$250 to use for purchase of materials for the unit. Each region winner will receive a check for \$100.*



# APPLICATION

Please type or print information clearly (other than signatures)

Contact Person (one contact only) \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

Note: Winners will be notified during the summer months. Please use an appropriate summer address.

Email Address \_\_\_\_\_

County \_\_\_\_\_ Signature \_\_\_\_\_

PTA Region (see website for region map) \_\_\_\_\_

Daytime Phone (\_\_\_\_\_) \_\_\_\_\_ Evening Phone (if different) (\_\_\_\_\_) \_\_\_\_\_

Submitting Group \_\_\_\_\_



## PTA INFORMATION

If a PTA unit, please also complete the following: \_\_\_\_\_

PTA Name \_\_\_\_\_ Unit Code # \_\_\_\_ - \_\_\_\_\_

School Name \_\_\_\_\_

Name of PTA President \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_ Email Address \_\_\_\_\_

Signature of PTA President \_\_\_\_\_

Region your unit is located \_\_\_\_\_

Theme/Title of PARP program \_\_\_\_\_

Grade levels participating in PARP program \_\_\_\_\_

Total number of students in participating grade levels \_\_\_\_\_

Estimated number of students participating \_\_\_\_\_

Length of program (weeks/months) \_\_\_\_\_

## **Instructions:**

- Limit responses to all three Category Areas to a total of **four pages** combined.

## **Category Areas:**

### **1.Goals (10 points)**

Briefly list your Pick A Reading Partner program goals.

*Did your goals support reading? Are they well-written and attainable?*

### **2.Implementation (55 points)**

Provide a brief summary of your program; include a description of how the program was accomplished and who was involved.

*What activities did you do? Did you have a cultural arts connection? How was the participation with the students, parents, community (inside and outside of school)? Did you use the PARP logo, NYS PTA logo and/or create your own logo?*

### **3.Results and Evaluation (20 points)**

State how your goals were accomplished and what tools were used to determine the results. If goals were not met, describe what you would improve next year.

*How did you assess your success? What instrument of measure did you use for participation/number of books read, etc.? Did you do an evaluation? Did you state if goals were met and how to improve for next year?*

**Supportive Materials (Bonus points):**

- Supporting materials may be reduced or altered to fit the required number of pages.
- **No more than fifteen (15) additional pages** of supportive materials, single-sided 8 ½ x 11-inch, may be submitted. Please include copies of information (forms, fliers, calendars, etc.) and press releases sent to parents, teachers and the community explaining the program. **Note: Double sided brochures are considered two (2) pages.**
- The use of copyrighted material is not acceptable.

All materials must be clearly photographed or scanned for digital transmission or photocopying. The winning application will be reproduced exactly as submitted. This application subsequently becomes the supplement to the Pick A Reading Partner (PARP) Toolkit and the property of the NYS PTA.

**DEADLINE**

**Application must be postmarked or emailed no later than MAY 15 and sent to your PTA Region Director (see NYS PTA website for address). Do not send applications to the NYS PTA office.**