



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 the president's signature and email address to acknowledge the PTA is a unit in **good standing**. Before requesting this recognition, please be sure your Unit/Council's Bylaws, Insurance, Membership, IRS status, and Officers (entered into Givebacks) are up to date.
- ☐ 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: 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 via mail (hard copy) OR email by January 31, 2026. 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 composed of representatives from the PTA/PTSA, administration, faculty and students. **The application MUST be signed by the chair of the selection committee.**

CANDIDATE AND SCHOOL INFORMATION:

Candidate's Name:

Phone Number:

Email:

Candidate's Address:

Candidate is: ☐ Junior ☐ Senior at (School Name):

Address of School:

Name of Principal:

Phone Number:

Email:

Signature of Principal:

PTA UNIT INFORMATION:

Name of PTA/PTSA:

Unit Code: _ _ - _ _ _ Name of Unit President:

Unit President Address:

Phone Number:

Email:

Signature of PTA President:

PTA UNIT AWARD SELECTION COMMITTEE INFORMATION:

Name of Chairman:

Phone Number:

Email:

Address:

Signature of Chairman: _____ Date:

Completed applications with attachments must be sent to your Region Director ([Contacts-Region Director-NYS PTA](#)) via mail (hard copy) OR email by **January 31, 2026** to be considered. Faxed applications will **NOT** be accepted.

**FOR
OFFICE
USE
ONLY**

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Bylaws

Insurance

Officers

<input type="checkbox"/>
<input type="checkbox"/>

IRS

Status

Member
ship

"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 disability prevents someone from providing a typed statement, an audio recording will be accepted instead.

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

[illegible]

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 the 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.

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.