## **Outstanding Support Staff Award Application**

Complete this application, SAVE and email to <u>alabamapta.awards@gmail.com</u> by March 1. Keep a copy for your records. **Applications, including photographs will not be returned.** 

**Letters of recommendation:** Up to four letters of recommendation from PTA members, fellow staff members, etc. may be uploaded to accompany this application. \*\*Please include a headshot of Nominee

headshot of Nominee.
Name of person completing the application: Click here to enter text.
School Year: Click here to enter text.
School System: Click here to enter text.
Name of Nominee: Click here to enter text.
Nominee email address: Click here to enter text.
Nominee phone number (if no email): Click here to enter text.
Grade Division: Elementary (PreK-6 <sup>th</sup> ) Middle/Jr. High (6 <sup>th</sup> -8 <sup>th</sup> ) Secondary (9 <sup>th</sup> -12 <sup>th</sup> )
Multi School Community
(K-8 & K-12 schools must specify the division in which they are applying)
School Name: Click here to enter text.
PTA Name (name shown in MemberHub): Click here to enter text.
Is PTA/PTSA part of a council?
Council Name (if applicable): Click here to enter text.
PTA President's Name: Click here to enter text.
PTA President's Address: Click here to enter text.
City, Zip: Click here to enter text.
Telephone: Click here to enter text.
Email: Click here to enter text.

## Winners will be notified prior to Annual Convention to ensure their attendance.

RESPOND TO THE QUESTIONS BELOW. (Note: read questions carefully and provide clear, concise, and detailed information).

How is the nominee SUPPORTIVE OF PTA? Past and current involvement may be cited as examples of support. Nominee should be a member of PTA/PTSA.

Click here to enter text.

How is the nominee an EFFECTIVE ADVOCATE: Cite examples of how this support person is an effective advocate for student success.

Click here to enter text.

