



**ALABAMA PTA GOLDEN APPLE VERIFICATION  
FORM (DEADLINE OCTOBER 1, 2024)**

The Golden Apple Award is presented to all principals whose PTAs submit 100% faculty membership to the Alabama PTA office by October 1, 2024. Faculty is defined as full-time certified personnel. Part-time employees and non-certified personnel are encouraged to join but are not required to qualify for the Golden Apple Award.

Note: Golden Apple membership counts towards 100% membership award!

1. Fill in the information requested below. Please type or print clearly.
2. Ensure all faculty members are entered correctly into Givebacks by October 1.
3. Remit dues for all faculty members either by check mailed to Alabama PTA or echeck through Givebacks to Alabama PTA.
4. Complete and return this form (electronically to **alabamapta@yahoo.com.**)
5. Form must be signed (may be e-signed) by principal or designee to ensure receiving this award.

*Certificates will be mailed to the school unless councils choose to present to those local units within their council.*

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**PTA Name (as shown in Givebacks):** .

**School District:**

**Council:**

**PTA Category (Select one)**

**Elementary** – Grade Ranges PreK-6<sup>th</sup>

**Middle/Jr High-** Grade Ranges 6<sup>th</sup>-8<sup>th</sup>

**High School** - Grade Ranges 9<sup>th</sup>-12<sup>th</sup>

**Multi School-** More than one school or school's Grade Range includes more than one Category such as K-8. Please also select which school category this form is being submitted if more than one school is part of this PTA

**Elementary**

**Middle/Jr High**

**High School**

**Community- Not attached to specific schools. Example-Special Education PTA**

**Number of Certified Staff:**

**Enrollment as of September 1, 2024:** .

**PTA President's Name:**

**Email:**

**Best Contact Phone Number:** .

**Principal Name (printed):** .

**Title:** .

**VERIFICATION:** I certify 100% of the full-time certified faculty at my school are members of the PTA.  
A typed signature acknowledges an electronic signature and verification.

**Principal or designee :**

**Date:**