



Outstanding Youth Service Leader Award Application

**Application Deadline
February 15, 2018**

Each year, the Illinois PTA will be honoring Youth from throughout the State of Illinois that have demonstrated Outstanding Service Leadership. Applications will be accepted from local units in good standing from all over the state of Illinois.

The Outstanding Youth Service Leaders awards will be presented at the Illinois PTA SPOTLIGHT, a children's celebration of art and community event. They will be presented with a plaque by the Illinois PTA State President or appointed representative. Press releases will be sent statewide along with coverage in both One Voice Illinois and the Illinois PTA website of their selections as an Illinois PTA Outstanding Youth Service Leader.

Completed applications received by the due date (February 15, 2018) will be considered by a committee of professionals. Once the decision is made, the youth and the local unit submitting the application will be notified of the selection.

They will receive information on the time and location regarding the recognition event. They will be welcomed to invite additional attendees to join us in the celebration.

Selection Criteria

Application

- Read all of the directions before filling out the 2017-2018 application form.
- Must be signed by the local unit president submitting the application and the nominee's parent or guardian.
- Submit the application with all supporting documents to the Illinois PTA state office or email to cmccarty@illinoispta.org.
- Must be postmarked, emailed, or hand delivered by February 15, 2018.
- Nomination applications that are not complete will NOT receive consideration.

Eligibility

- Each local PTA/PTSA unit in "Good Standing" may nominate one individual.
- Nominee must be age 5 through 18.

Technical Requirements of Nomination Application

- Nomination applications must include a completed 2017-2018 application.
- Nomination application must be printed legibly or typed.
- If more space is needed to answer the questions on the application, you may use no more than 2 pages of 8 ½ X 11 standard white paper.
- If additional pages are needed, staple all pages (including application pages). No binders, covers or colored paper.
- Digital head and shoulder photo of nominee - minimum 2MB in size.



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Nominee: _____ Age _____

Nominee Address: _____

City: _____ Zip: _____

Nominated by _____

PTA/PTSA Illinois PTA Region _____

Nomination form prepared by _____ Title _____

Contact phone number: _____ Contact email: _____

In the event your nominee is chosen by the Illinois PTA an invitation will be issued to the PTA/PTSA, the nominee, and their family to the Illinois PTA [children celebration event]

Signature of Local Unit President

Signature of Nominee's Parent/Guardian

This form must be signed by the Local Unit President and the Nominee's Parent/Guardian for the application to be valid.

Send application to:

Illinois PTA
PO Box 907
Springfield, IL 62705-0907
Or submit online to:
cmccarty@illinoispta.org
Make a copy for your records.
Application deadline (postmarked, hand delivered, or online submission):
February 15, 2018

<p>Parent / Guardian Consent</p> <p>I _____ hereby give Illinois PTA permission to use any information contained within this application and any still and/or moving image being video footage, photographs and/or frames and/or audio footage depicting myself and/or my child named within this application for any of the following uses:</p> <p style="padding-left: 40px;">Advertisements, marketing, leaflets, or any other use such as for training, educational, or publicity purposes.</p> <p>Parent/Guardian Signature: _____</p>



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1. Please provide a full description of the service activity for which your nominee demonstrated outstanding leadership. If service is through or on behalf of an organization, list the full name of that organization; do not abbreviate.

You must state the type and purpose of the activity, the outcome, and the student's involvement. Please also list the dates during which the student was personally involved with the activity (when the student's involvement started and ended, if applicable). Tell us what the **individual student** did, not just what the group accomplished. (Maximum 500 words)



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- 2. Estimate the total number of hours the student personally and actively invested in this activity during the past 12 months. Be careful not to overestimate hours. Enter numbers only.
- 3. How many others volunteers participated in this activity under the students leadership.
- 4. Estimate the total number of hours volunteered by others as a result of the student's leadership in this activity during the past 12 months. Enter numbers only.
- 5. Approximately how many individuals directly benefited from the student's involvement in this activity? Only include people who received direct support from this student's activity. Enter numbers only.

Other Activities / Service

Please list up to five other activities / service the student has been involved with. If there are more than five, list the five most important. Do not include hours for the primary volunteer activity recorded in the previous section.

Hours contributed should include only the time the student personally spent volunteering for each activity. Do not overestimate time spent.

Activity 1: Activity description: _____

Hours contributed (enter numbers only) 2017 2016 2015

Activity 2: Activity description: _____

Hours contributed (enter numbers only) 2017 2016 2015

Activity 3: Activity description: _____

Hours contributed (enter numbers only) 2017 2016 2015

Activity 4: Activity description: _____

Hours contributed (enter numbers only) 2017 2016 2015

Activity 5: Activity description: _____

Hours contributed (enter numbers only) 2017 2016 2015