

HONORARY SERVICE AWARD* NOMINATION FORM FOR UNIT, COUNCIL AND DISTRICT PTAs

The Honorary Service Award Selection Committee requests that members of _____ PTA/PTSA assist in the selection of deserving recipients for recognition at PTA/PTSA event or at a PTA meeting. Nominated individuals or organization who have made significant contributions to the well being of children, youth or families in this school and/or community can be considered for this award. Current members, officers and teachers may also be considered for this award.

*Honorary Service Award Program includes the Honorary Service Award (HSA), Continuing Service Award (CSA), Golden Oak Service Award (California's highest honor), Very Special Person Award (VSP) and Donations in name of individual or organization. (See *Toolkit*, Section 7.6.3 Honorary Service Award (HSA) Program)

HONORARY SERVICE AWARD PROGRAM

— — — please print — — —

Specify award category:

Honorary Service Award (HSA)
Continuing Service Award (CSA)
Golden Oak Service Award

Very Special Person Award (VSP)
Donations

Name of individual nominated: _____

Title or position: _____

Name of organization nominated: _____

Contact Person: _____

Address: _____

Telephone: (____) _____ E-mail: _____

Reason for nomination:

Name of person submitting the nomination: _____

Telephone: (____) _____ E-mail: _____ Date: _____

All nominations will be considered. The HSA Selection Committee will select the recipient.

Nomination DUE DATE for presentation: _____, 20____

PLEASE RETURN FORM TO: _____ **PTA/PTSA**
