



Unit Membership Certificates

*Award Application **must be received by April 15th***

All Units must have current Standards of Affiliation to apply for Awards

Please Type and submit via mail, email, or upload to www.michiganpta.org **NO FAXES**

Unit Name: _____ Michigan PTA/PTSA ID #: _____

Unit President's Name: _____

Unit President's Email Address: _____

Unit President's Mailing Address: _____

Unit Membership Chair's Name: _____

Unit Membership Chair's Email Address: _____

Award Purpose/Goal: These Membership Awards are intended to recognize the power of service for children through the combined forces of parents, teachers, students and the community. A strong, passionate membership base is the cornerstone of making a difference in the lives of children.

Award Selection Criteria: The Membership awards are based on the criteria listed by each Award type below. **(The PTA/PTSA MUST have current Standards of Affiliation to apply for awards)**

The Unit named above is applying for the following awards:

_____ **Gold Star PTA** (Units whose membership sales exceed pupil count and represent entire community [Complete All sections on page 2])

_____ **100% PTA** (Total number of memberships sold equal or exceed 100% of *official student count*) [Complete sections A, B, D on page 2]

_____ **100% Staff** (Membership sold to every full-time employee officially assigned to the unit's building) [Complete sections A, C on page 2]

_____ **Michigan PTA Honor Roll** (Total number of memberships sold equal 80%-99% of official student count) [Complete sections A, B on page 2]

_____ **Student Membership** (Units with student members equaling 10% or more of student count) [Complete sections A, B, D, F on page 2]

_____ **Business Memberships** (Units with at least 5 Business Membership sold) [Complete sections A, E on page 2]

Sections descriptions appear on next page

Award Information Sections

Section A

PTA School Type: _____ Pre-School _____ Elementary (Lower/Upper)
_____ Middle School _____ High School _____ Other

Section B

Official Student Count*: _____ Representing _____ number of families
*Get these numbers from your school district or Principal)

Section C

Official Full Time Staff Count*: _____ *Get these numbers from your district or Principal)
Total Full Time Staff Memberships Sold: _____

Section D

Total PTA/PTSA Memberships Sold: _____

Section E

Total Business Memberships Sold: _____

Section F

Total Student Memberships Sold: _____

Section G

Total Memberships Sold to Administrators: _____

Total Memberships Sold to Community members (non-parents) _____

Principal Printed Name and Signature

Unit President Printed Name and Signature

Submit completed application and all supporting documentation:

Via Mail



Membership Committee
Michigan PTA
1390 Eisenhower Place
Ann Arbor, MI 48108

Via Email



Email to
membership@michiganpta.org

Online



www.michiganpta.org

MUST BE RECEIVED IN THE Michigan PTA OFFICE ON OR BEFORE APRIL 15th - NO EXCEPTIONS

For Office Use Only

Date Rec'd _____ Good Standing _____ Bylaws Dated _____ Data Verified _____ Awarded? _____