2023-2024 HELPING HANDS AWARD NOMINATION FORM

DUE DATE - Check with your Region Advisor or submit to VP of Field Service by March 15, 2024

Selection Guidelines

Nominee:
● may include any member of your PTA who goes above and beyond
● must be involved in and support your PTA
● has made a positive impact on the lives of children
● is dedicated to the mission of PTA (to make every child’s potential a reality by engaging and empowering families and communities to advocate for all children)

Nominee Name ________________________________________________________________

Nominee Phone _______________ Email ____________________________________________

PTA Unit _______________________________ Ohio PTA Region # __________

PTA Contact Person’s Name _________________________________

PTA Address _______________________________________________________________

PTA Contact Person’s Phone _____________ Email ________________________________

Please attach a typed statement stating how the nominee’s PTA involvement has impacted the lives of children and youth. (300 words or less)

PTA Contact Person’s signature ______________________________________________

Please email your Region Advisor, view current contact information at:
https://www.ohiopta.org/board-of-directors/

Note: Email VP of Field Service if you do not have a Region Advisor