

RIGHT FOOT AWARD APPLICATION
 Application due November 1 (must be postmarked by)

Local Unit Name:		President Name:	
Email:		Phone:	
School Enrollment as of 20-day count:			
PTA Membership	Total to date:	Total on June 30 of last school year:	

DID OUR PTA/PTSA...	YES, WE DID!
FINANCIAL	
Submit the signed End of the Year Outside Organization financial review (Audit) to the bookkeeper, FPTA & DCCPTA	
Complete Tax filing (990N postcard or 990EZ) with a copy of acceptance sent to DCCPTA Treasurer and Florida PTA	
Approve the Budget at a General Meeting) Attach a copy of Budget & Minutes to award form	
Utilize a Bank Account in a bank or savings and loan outside of the school. Please list name of bank or S/L: _____	
Follow guidelines in <i>Money Matters</i> * for financial practices. Please list the names of all check signers: _____ Number of signatures required per check: ____; Number of counters required to prepare each cash deposit ____; Number of people required to complete each cash deposit at bank ____.*	
Submit Outside Organization Treasurers Reports to bookkeeper monthly – July, August and September.	
Submit Outside Organization Fund-Raising Request forms to bookkeeper. List # submitted: ____.	
Submit DCCPTA dues prior to November 1	
LEADERSHIP AND BOARD OPERATIONS	
Submit Elected Officers contact information to Florida PTA	
Include Principal or Designee as a Board Member. Attach a copy of your Board roster (elected officers and committee chairs) with contact information.	
Meet in regular monthly board meetings	
Notify membership and conduct at least 3 General Meetings. List dates of proposed General Meetings: _____	
Attend required DCCPTA President and Treasurer training annually. List date(s): President: _____ Treasurer: _____	
Attend at least 2 of the following County Council General Meetings: August, September, October (Circle ones attended)	
Attend DCCPTA Fall Leadership Workshops	
Operate with current Bylaws - approved for 3 years following the date stamp on page 1	
Elect Nominating Committee and Officers at General Meetings. List proposed dates: _____	
MEMBERSHIP	
Distribute PTA membership cards by end of 1 st Quarter. List date(s) cards were distributed: _____	
Paid state and national portion of all dues collected to date to Florida PTA. Dues are due monthly.	
PROGRAMS	
Provide Programs and services in line with the PTA mission and purpose. List titles and proposed dates of 3 programs: _____	
Items in bold red are required to remain <u>In Good Standing</u> with DCCPTA	

_____ PTA President Name (Print)

_____ PTA President Signature

_____ Principal's Name (Print)

_____ Principal's Signature

Attach the following items to this completed form:

- ✓ Financial Review (Audit),
- ✓ Board Roster with contact information,
- ✓ Budget and Minutes from General Meeting at which budget was approved

and send to: Attn: DCCPTA Awards Chair, P.O. Box 5397, Jacksonville, FL 32247

E-mail questions to: Awards@DCCPTA.org