



HEALTH/SAFETY PROGRAM AWARD

Name of Local Unit: _____

Name of Program/Fair: _____

Date of Program/Fair: _____ # of Participants: _____

Criteria for Award: 3 ITEMS must be met in order to qualify:

1. **PTA/PTSA plans and implements** a health and/or safety program/fair that promotes awareness of health or safety issues, or physical activity for families.
2. Must be a PTA in good standing: See all SIX requirements at <https://www.dccpta.org/running-your-pta/local-unit-compliance/>.
3. Submitted to the DCCPTA Awards Chair:

Deadline: On or before March 31st at 12 noon.

Upload: Upload your completed awards applications here - <https://bit.ly/2NqgOhR>.

Email: If you're having difficulty uploading your files, you may email the documents to awards@dccpta.org.

**If you prefer to submit a paper copy of your application, you must contact the awards chair by email (awards@dccpta.org) no later than March 29th to arrange drop off.*

Description of Project: (attach description on one (1) additional page)

PTA President's Name (print): _____

PTA President's Signature: _____

Principal's Name (print): _____