

# Outstanding School Nurse Award

**Deadline: March 15, 2022** [Postmark date. "Fax" or E-Mail copies are not acceptable.] Mail this form to: Kentucky PTA, 148 Consumer Lane, Frankfort, KY 40601

**Please Copy this Form and Distribute to the Appropriate Person to Complete.**

**The nominee must be a member of a PTA/PTSA "In Good Standing" as of October 15, 2021.**

Include: Two letters of recommendation outlining special qualities and contributions of the nominee that have improved the health environment in the school.

(One letter from an administrator and one from a PTA/PTSA member.)

School Nurse's Name \_\_\_\_\_

Number of Years in Present Position \_\_\_\_\_ Number of Years in School Nursing \_\_\_\_\_

School Enrollment \_\_\_\_\_ County \_\_\_\_\_ PTA District \_\_\_\_\_

Name of PTA \_\_\_\_\_ Name of School \_\_\_\_\_

School Telephone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Grade Levels Served in Present Position \_\_\_\_\_

Name of PTA/PTSA President \_\_\_\_\_

Address \_\_\_\_\_

Street/PO Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Name of PTA/PTSA President \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

**To be a Unit in *GOOD STANDING* All PTAs/PTSAs MUST:**

- Send at least one national and KY PTA state dues payment (\$3.50 per member) to the Kentucky PTA office no later than October 15<sup>th</sup>
- Send district dues to district treasurer or Kentucky PTA office as required
- Send the PTA financial review form to the Kentucky PTA office and school principal by July 15<sup>th</sup>
- File 990 IRS Tax Form by Nov. 15 and mail a copy to the Kentucky PTA office
- Send bylaws to the Kentucky PTA office for approval every 5 years

## SCHOOL NURSE AWARD CRITERIA

1. Nominee must have three years' experience as a school nurse.
2. Describe how the nominee is directly involved with students. At least 50% of nominee's time must be spent in contact with students.
3. What creative, innovative programs has the nominee implemented?
4. How does the nominee identify and meet the needs of the students and parents in your school?

Please attach page(s) addressing the questions above. Limit: 5 pages (including this form); one side only, double-spaced, type no smaller than 10 point; and may not be reduced.

### **Incomplete Applications Will Not Be Considered.**

The submitting PTA/PTSA will be notified if their nominee is a winner.

