

In keeping with Georgia PTA's pioneer efforts to continue improving the health and lives of children and families statewide, local units are now eligible for the Healthy Fundraising Award. The amount of \$1,000 will be awarded to one Elementary School, one Middle School and one High School PTA/PTSA that utilizes the most innovative, non-food fundraising method. This award encourages PTA/PTSAs to comply with federally mandated Wellness Policies and develop alternatives to food-based fundraisers.

ELIGIBILITY AND CONDITIONS

Applicants must:

- Be a PTA in good standing* with Georgia PTA. (*Dues paid, up-to-date bylaws and audit on file.) If you have any questions about your status, contact the state office.
- Award applicants must submit a program budget to include the financial goal (how much money to be raised) and indicate what PTA program(s) these raised funds will support.

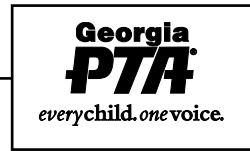
Application Process

- Interested PTAs should submit a complete application by the second Friday in March, including program budget to:

Georgia PTA/ Healthy Fundraising Award
114 Baker Street, NE
Atlanta, GA 30308-3366

- Local Units may submit multiple applications if more than one non-food fundraiser was facilitated.
- Award Recipients will be notified after March 30.
- Incomplete and late applications that do not follow the guidelines will be disqualified.

HEALTHY FUNDRAISING AWARD APPLICATION



APPLICATION DEADLINE: POSTMARKED BY THE SECOND FRIDAY IN MARCH
Mail to Georgia PTA, 114 Baker Street, NE, Atlanta, GA 30308-3366

PTA Name _____

LU# _____ Council _____ District _____

Check One: High School Middle School Elementary School

Mailing Address _____

City _____ Zip _____

Contact Person _____

Daytime Phone _____ Fax _____

Email _____ Project Name _____

Please answer the following questions on no more than three (3) pages, 12-point Times New Roman font, double-spaced. Priority rating will be given to project ideas that are easily transferable to another local unit as well as to local units who have a PTA Health & Wellness Committee* (contact Georgia PTA Health & Wellness Team or your District Director if you need assistance in forming a new local unit Health & Wellness Committee.)

- Describe your innovative, non-food fundraising program.
- Briefly describe the program and include how much time was used in planning, number of volunteers required to execute, and how much money was raised vs. intended goal.
- Please describe how your local unit plans to use the \$1,000 Award if selected.
- Are there additional community partners collaborating on this project? If so, what are their roles?

The PTA President and Principal must sign and date this application.

PTA President's Signature _____ Date _____

Principal's Signature _____ Date _____