



SAMPLE School of Excellence Enrollment Form

This is a **SAMPLE** only. Only applications submitted online at PTA.org/Excellence by the due date will be considered for this program cycle. Asterisks(*) indicate a required question. If you have any questions, please contact Excellence@PTA.org.

Program Leader Information

*First Name:

*Email Address:

*Last Name:

*Home/Mobile Phone Number:

*PTA Role:

In addition to yourself, **you may include up to two other program contacts to receive regular email communication** from Excellence@PTA.org throughout the program cycle.

* Additional Contact #1

Additional Contact #2

First Name:

First Name:

Last Name:

Last Name:

PTA Role:

PTA Role:

Email Address:

Email Address:

PTA and School Information

Search for and add your PTA's information record below by entering ONLY ONE of the following: PTA name, PTA ID or city. **Your PTA's information will automatically populate in the gray fields.** If you are searching by PTA ID, be sure it is eight digits long. If your ID does not have eight numbers, enter zeros at the beginning to make it eight digits.

If the PTA record is not appearing in the search or if any of the PTA information is populated incorrectly, email Excellence@PTA.org.

PTA Address:

State/Province:

Street Address:

Zip/Postal Code:

Line 2:

School Name:

City:

School Location:

Country:

School Level:

*Is the above PTA address correct for receiving a banner if designated? (Yes, No) Should your PTA be designated, you will receive a National PTA School of Excellence banner to hang prominently at your school.

*Please verify if your school is Title I. (Yes, No)

*Briefly describe the demographics of your PTA, school and local community. (250 words or less) Your response won't count for or against your PTA in the School of Excellence program. It is just good context for your PTA to have as you begin work in the program. *Not sure of overall demographics for your community? Look up available data for your school in this [look up tool](#).*

***Please provide the following information about your school principal.** Your school administrators play a valuable role in strengthening family-school partnerships.

Principal's First and Last Name:

Principal's Email Address:

Program Information

Is this the first time your PTA will participate in the School of Excellence program? (Yes, No, Unsure)

If your PTA is a past National PTA School of Excellence designee, please select your award designation year(s). Not sure? [Download a list of previous Schools of Excellence.](#)

- | | |
|---------------------------------|---------------------------------|
| <input type="radio"/> 2014-2016 | <input type="radio"/> 2020-2022 |
| <input type="radio"/> 2015-2017 | <input type="radio"/> 2021-2023 |
| <input type="radio"/> 2016-2018 | <input type="radio"/> 2022-2024 |
| <input type="radio"/> 2017-2019 | <input type="radio"/> 2023-2025 |
| <input type="radio"/> 2018-2020 | <input type="radio"/> 2024-2026 |
| <input type="radio"/> 2019-2021 | |

Why did you choose to enroll in the School of Excellence program? (Select up to 3)

- To renew our School of Excellence designation
- Re-enrolling to continue work we started last year
- Foster a welcoming and inclusive school community (**Welcome All Families**)
- Improve overall communication between the PTA, school and school community (**Communicate Effectively**)
- Support students' academic, social and emotional learning with PTA, family and educator collaboration (**Support Student Success**)
- Support and foster family and student advocacy (**Speak Up for Every Child**)
- Create connections and strengthen family and student voice in shared decision making (**Share Power**)
- Build new community partnerships and/or improve existing community relationships (**Collaborate with Community**)
- Other—Please share anything else about why you are enrolling in the School of Excellence program.

How did you hear about the program?

- | | |
|---|--------------------------------|
| <input type="radio"/> National PTA | <input type="radio"/> Media |
| <input type="radio"/> State PTA | <input type="radio"/> Educator |
| <input type="radio"/> Region/District/Council PTA | <input type="radio"/> Other |
| <input type="radio"/> Local PTA | |

