

# REPORTS TRANSMITTAL MASTER COVER FORM



**Directions:**

- Each local unit president must complete ONE Reports Transmittal Master Cover Form and submit it with ALL of the reports the local unit is submitting. Submit TWO copies of each report to Georgia PTA for judging.
- Verify that the information on this transmittal form is correct and consistent with other report cover sheets being submitted (correct LU ID#, district, council, number of reports, etc.).
- Entries must be postmarked or delivered to the state office on or before the **second Friday in March**: Georgia PTA, 114 Baker Street NE, Atlanta, GA 30308.
- For more information, contact the state office at 404-659-0214 or [gapta@georgiapta.org](mailto:gapta@georgiapta.org).

Date \_\_\_\_\_ PTA Local Unit ID# \_\_\_\_\_ District \_\_\_\_\_

Local Unit Name \_\_\_\_\_

Council Name: \_\_\_\_\_

**Check one:**     Elementary 750 and below                       Middle/Junior High School                       High School  
                     Elementary 751 and above                       K-8 School

President's Name \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Email \_\_\_\_\_

Co-President's Name (if applicable) \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Email \_\_\_\_\_

Principal's Name \_\_\_\_\_

**Total number of reports submitted:** \_\_\_\_\_

**Please check which reports are being submitted:**

- Outstanding Local Unit PTA                       The Model PTA                       Visionary Award  
 Outstanding Principal                       Outstanding School Nurse                       Outstanding Educator  
 Georgia PTA Hearst Family-School Partnership Award                       Best Ideas

<b>FOR STATE OFFICE USE ONLY</b>	
Received date _____	Received by _____
Catalogued by _____	Date _____
Total number of reports received _____	