**Unit Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Unit Contact (Name, email, phone) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_ The Get Connected Award**

 Please attach a list highlighting the 25 new members to qualify.

|  |  |
| --- | --- |
| Previous Year Membership |  |
| Current Year Membership |  |

**\_\_\_\_ The All in This Together Award**

 Please attach a list of the 25 non-traditional members to qualify.

**\_\_\_\_ The Bloom Where You are Planted Award**

 An increase of 30% from the previous year is required to qualify.

|  |  |
| --- | --- |
| Previous Year Membership |  |
| Current Year Membership |  |

**\_\_\_\_\_The Oak Tree Award**

|  |  |  |  |
| --- | --- | --- | --- |
| Year Founded |  | 10 Years or More? | Yes or No |

**\_\_\_\_ The Every Child One Voice Award**

|  |  |  |  |
| --- | --- | --- | --- |
| Annual Certified Enrollment |  | Annual Membership |  |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_**

**Signature of Unit Representative Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_**

**Certified by IPTA Member (Name) Date**