

New York City Department of Education Office of Parent Engagement

P A / P T A E L E C T I O N C E R T I F I C A T I O N F O R M

Elections for all Parent Associations and/or Parent-Teacher Associations must be certified by the Department of Education. This form must be completed and signed by the Principal or his/her designee (i.e., Assistant Principal). The school's Parent Coordinator may not be the Principal's designee. The signature below certifies that the nominations and election process was conducted in accordance with Chancellor's Regulation A-660, "Parent Associations and the Schools," and the association's bylaws. The **original** signed copy of this form must be maintained on file in the principal's office. A copy of this form must be provided to the association. Copies of this form must be also be forwarded to the appropriate Superintendent's office and the Department's Office of Parent Engagement.

Name of Organization (ex. PA or PT A of IS 90): _____

Region: _____ Quorum Required for Organization: _____

Date of Spring Nominations Meeting: _____ Date of Spring Election Meeting: _____

Date of Expedited Nominations/Election Meeting: _____

Election Meeting Chaired by: _____

Number of Eligible Parent Voters in Attendance: _____

INCOMING P A / P T A O F F I C E R S (Please include all requested information for each incoming officer)

Title: President

Name: _____

Address: _____

Home Telephone: _____ Business Phone: _____

E-mail: _____

Title: Co-President

Name: _____

Address: _____

Home Telephone: _____ Business Phone: _____

E-mail: _____

Title: Recording Secretary

Name: _____

Address: _____

Home Telephone: _____ Business Phone: _____

E-mail: _____

Title: Treasurer

Name: _____

Address: _____

Home Telephone: _____ Business Phone: _____

E-mail: _____

INCOMING PA/PT A OFFICERS Continued

Title: _____

Name: _____

Address: _____

Home Telephone: _____ Business Phone: _____

E-mail: _____

Title: _____

Name: _____

Address: _____

Home Telephone: _____ Business Phone: _____

E-mail: _____

Title: _____

Name: _____

Address: _____

Home Telephone: _____ Business Phone: _____

E-mail: _____

Title: _____

Name: _____

Address: _____

Home Telephone: _____ Business Phone: _____

E-mail: _____

Title: _____

Name: _____

Address: _____

Home Telephone: _____ Business Phone: _____

E-mail: _____

Principd's Name _____ Principd's Signature _____