

STUDENT REFLECTIONS PROGRAM – Local Unit Entry Form



All entries must be submitted to the State Office on or before January 19.
 Send to: Tennessee PTA, 1905 Acklen Avenue, Nashville TN 37212
 1-888-782-5712 www.tnpta.org

SPECIAL EDUCATION VISUAL ARTS ENTRIES ONLY!!!

Each local unit may submit five (5) entries in the
VISUAL ARTS – SPECIAL EDUCATION category.

Please print or type the names and other information. The certificates will be completed from this form. If not legible, certificates may be incorrect.

Name of PTA/PTSA _____

Name of President _____ Phone (____) _____

Address _____ City _____ Zip _____

President's email address _____

Name of Chairman _____ Phone (____) _____

Address _____ City _____ Zip _____

Chairman's email address _____

Council _____ County _____ Region _____

CATEGORY 1: Visual Arts-Special Education

	Name of Student	Address	Age	Grade
1				
2				
3				
4				
5				

Number of entries in your Visual Arts-Special Education category _____

ANY REPORT NOT FOLLOWING THESE GUIDELINES WILL BE DISQUALIFIED FROM JUDGING.