

REFLECTIONS PROGRAM GUIDELINES



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

2009-2010 THEME: “Beauty Is...”

GUIDELINES:

1. **OFFICIAL STUDENT ENTRY FORM** ó The official National PTA student entry form for the current year **must** be securely attached to the back of each entry. Each form must be completely filled out, including the correct mailing address of the entrant. Please emphasize legibility of names and addresses. The student age and grade level are needed for accurate placement of entry in correct category for judging.
2. **STATE LOCAL AND COUNCIL ENTRY FORMS** ó Each local PTA/PTSA may submit a total of five (5) entries in each category (Visual Arts, Literature, Music, Photography, Dance Choreography, and Film/Video Production). **No more than thirty (30) entries should be sent to the State PTA office by each local unit.**

Each Council may submit a total of five (5) entries in each category, using the council entry form. **No more than thirty (30) entries should be sent to the State PTA office by each Council.**

Attention Locals ó If your entry does not win on the council level, it may still be submitted to the State level for competition. (An entry not placing on the Council level could possibly win on the State level. Different judges view entries differently.)

3. **LOCAL PTA PARTICIPATION FORM** ó All Local Units and Councils participating in the State Reflections Program need to send the PTA partnership form **completely** filled in to the State PTA Office with your reflections entries.

THIS FORM is extremely important as it is used by the State Cultural Arts/Reflections Chairman to tally the entries for submittal to the National PTA; it also serves as a record of Tennessee's participation.

Please refer to the Cultural Arts Section of this Handbook for guidelines specific to each Reflections category and more information.

REMEMBER: **Entries without the appropriate forms will be disqualified from judging. If there is a question, contact the State Reflections Chairman.**

2009-2010 PTA Reflections Program STUDENT ENTRY FORM Theme: "Beauty is..."

Directions: Please type or print clearly in black or blue ink (do not use pencil). Completely fill out the form down to and including the required signatures. Leave the boxed area for local PTA information blank. If you need more space, use the back of this form or an extra sheet of paper. Be sure to write your full name on any additional pages.

	Grade Division (check one)	Arts Area (check one)
Grade _____	<input type="checkbox"/> Primary; preschool-grade 2	<input type="checkbox"/> Dance Choreography
Age _____	<input type="checkbox"/> Intermediate: grades 3-5	<input type="checkbox"/> Film Production
	<input type="checkbox"/> Middle/Junior: grades 6-8	<input type="checkbox"/> Literature
Gender <input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Senior: grades 9-12	<input type="checkbox"/> Musical Composition
		<input type="checkbox"/> Photography
		<input type="checkbox"/> Visual Arts

Title of Work _____

Required Artist Statement _____
 Explain how your work relates to the theme _____
 See attached (Please print your name on any attached sheets.)

REQUIRED INFORMATION

Photography and Visual Arts: Give the dimensions of the work in inches, including mat. **L** _____ **W** _____
Photography: Location/date of shot: _____
 Describe the type of camera and process used in preparing the piece. _____
Visual Arts: Describe the medium (crayons, oil on canvas, etc.). _____
Dance Choreography: Name(s) of performer(s): _____
Film Production: Name(s) of person(s) appearing in your film: _____
 Was a computer used? If so, name the software and hardware. _____
Dance Choreography and Film Production: Credit the background music below (title, composer, and performer).

Musical Composition: Check one: Traditional Instrumentation Synthesizer
 Name(s) of person(s) who performed your composition: _____
 Was a computer used? If so, name the software and hardware. _____
 Are lyrics included? If so, how do your lyrics complement your composition? _____
 _____ Fold Here _____

Student's
 first name _____ Middle intl. _____ Last name _____
 Address 1 _____ Address 2 _____
 City _____ State _____ ZIP _____
 Phone (____) _____ E-mail _____

PTA includes the national, state, district/region, council, and local PTA/PTSA organization or unit. I grant PTA permission to use my works for commercial or noncommercial use, including but not limited to public presentation of the work and reproduction of the work in print, electronic, and multimedia formats to promote the Reflections Program. PTA may continue to use my work as long as it has access to a copy or to a slide. PTA is not responsible for lost or damaged works. Entries may not be returned. I understand that I must participate in the Reflections Program through a PTA/PTSA in good standing. **I affirm that this is my own original work. I understand that the submission of my entry into the Reflections Program constitutes acceptance of the above conditions.**

Signature of student _____ Signature of parent/legal guardian (*necessary if child is under 18 years*) _____

TO BE COMPLETED BY LOCAL PTA **Check one:** PTA PTSA **Local eight-digit PTA ID:** _____
 Local chair name _____ Official PTA/PTSA name _____
 PTA address _____ City _____ State _____ ZIP _____
 E-mail _____ Phone (____) _____
Local PTA good standing status: Membership dues paid date __/__/__ Insurance paid date __/__/__ Bylaws approval date __/__/__



÷Beauty isí ö
 2009-2010 PTA Reflections Program
 LOCAL PTA PARTICIPATION FORM

The following information is required from all local PTAs participating in the Reflections Program. Please complete this form and forward it with your Reflections Program entries to the next level of judging. This form documents the number of entries submitted to the Reflections Program at the local PTA level. *Please provide all of the information requested.*

This form is to be completed by the local PTA representative.

Local PTA Information

PTA/PTSA name _____

PTA/PTSA address _____

City _____ State _____ ZIP _____

PTA/PTSA president's name _____

Reflections Program chair's name _____

Reflections Program chair's address _____

City _____ State _____ ZIP _____

Phone () _____ Email _____

School name _____

School address _____

City _____ State _____ ZIP _____

Total number of student enrolled in the school _____

Total number of student participating in the Reflections Program _____

	Total entries received	Total entries forwarded
Dance choreography		
Film production		
Literature		
Musical composition		
Photography		
Visual Arts		
Total number of entries		

Please send this completed form with your entries to the next level of judging.

STUDENT REFLECTIONS PROGRAM – Local Unit Entry Inventory 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

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 _____

**An Individual Student Entry Form must accompany each entry listed on the
 Local Unit Entry Form to be eligible for state judging.**

PLEASE COMPLETE FOR ALL CATEGORIES

CATEGORY 1: Visual Arts

	Name of Student	Address	Age	Grade
1				
2				
3				
4				
5				

Number of entries in your Visual Arts category _____

CATEGORY 2: Literature

	Name of Student	Address	Age	Grade
1				
2				
3				
4				
5				

Number of entries in your Literature category _____

(Continued)

PLEASE COMPLETE FOR ALL CATEGORIES

CATEGORY 3: Music

	Name of Student	Address	Age	Grade
1				
2				
3				
4				
5				

Number of entries in your Music category _____

CATEGORY 4: Photography

	Name of Student	Address	Age	Grade
1				
2				
3				
4				
5				

Number of entries in your Photography category _____

CATEGORY 5: Dance Choreography

	Name of Student	Address	Age	Grade
1				
2				
3				
4				
5				

Number of entries in your Dance Choreography category _____

CATEGORY 6: Film/Video Production

	Name of Student	Address	Age	Grade
1				
2				
3				
4				
5				

Number of entries in your Film/Video Production category _____

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.