



**NCHSA 2010  
Parent of the Year  
Application Form**



Each NC Head Start and/or Early Head Start Grantee may submit **ONE (1)** Parent of the Year application. The Parent of the Year must be the parent or legal guardian of a currently enrolled Head Start or Early Head Start child. To be eligible, the completed application must be **received** by the Awards Committee no later than **January 15, 2010**.

Please **TYPE** or **PRINT CLEARLY**:

**Name of Local Program's Parent of the Year:** \_\_\_\_\_

**Head Start Program:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Telephone:** (\_\_\_\_) \_\_\_\_\_

**Please have your Parent of the Year answer the following two questions:**  
*(Attach additional pages as needed.)*

**Question 1: How have you benefited from participating in your Head Start program?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Question 2: How have you helped/impacted your Head Start program?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Application MUST be signed by Head Start Director.**

\_\_\_\_\_  
Director's Signature

\_\_\_\_\_  
Date

Please mail completed application to:

**NCHSA Awards and Scholarships Committee  
ATTN: Patti Horan, Chairperson  
PO Box 4534  
Asheboro, NC 27204**

Or fax to: **800-619-7313**