



National PTA® Reflections

California State PTA Council and District PTA Participation Form



OFFICIAL PTA COUNCIL NAME: _____ DISTRICT #: _____ STATE: **CALIFORNIA**

OFFICIAL PTA/PTSA NAME: _____ NATIONAL 8-DIGIT ID NUMBER: _____

REFLECTIONS CHAIR NAME: _____ PHONE: _____ EMAIL: _____

CITY: _____ STATE: _____ ZIP: _____

Add Local PTA Participation forms within your area to report the following questions.

TOTAL SCHOOL ENROLLEMENT FOR ALL PTAs: _____

TOTAL NUMBER OF PTAs PARTICIPATING IN REFLECTIONS: _____ Local PTA Units _____ Councils _____ Districts

By division, how many entries were submitted to all of your Local PTA Units, in each arts category?

	Dance Choreography	Film Production	Literature	Music Composition	Photography	Visual Arts	Total
Primary							
Intermediate							
Middle School							
High School							
Special Artist							
Total							

GRAND TOTAL NUMBER OF ALL LOCAL PTA UNIT ENTRIES: _____

By division, how many entries did your Council or District PTA advance to the next judging round in each arts category?

	Dance Choreography	Film Production	Literature	Music Composition	Photography	Visual Arts	Total
Primary							
Intermediate							
Middle School							
High School							
Special Artist							
Total							

GRAND TOTAL NUMBER OF ENTRIES ADVANCED: _____