

**MY LOUISIANA ESSAY PROGRAM  
DISTRICT PARTICIPATION FORM  
2018-2019**

*This form is to be completed by the district PTA representative.*

Forward this form, local unit forms, and your winning entries to LAPTA 3rd VP. This form documents the number of entries submitted to the My Louisiana Essay Program at the local and district levels. Please provide all of the information requested.

District PTA Name: \_\_\_\_\_

Program Chair: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Number of local PTAs in district \_\_\_\_\_

Number of local PTAs participating in the program \_\_\_\_\_

Number of councils in district \_\_\_\_\_

Number of councils participating in the program \_\_\_\_\_

Total Entries Received \_\_\_\_\_

Total Entries Forwarded To State \_\_\_\_\_