



# PENNSYLVANIA HEAD START ASSOCIATION

PARENTS, STAFF, ADMINISTRATORS AND FRIENDS AFFILIATED FOR CHILDREN

Wendy King - Board President

Blair Hyatt - Executive Director

Head Start Community,

The PHSA Board has revised how it recruits nominations and selects new members to the PHSA Board. PHSA will continue to solicit candidates from our members to fill vacancies in the **Parent, Friend, Staff and Administrators'** groups of the Board of Directors. PHSA no longer holds elections to select new members to serve on the PHSA Board. Selection of members to serve on the Board is done by PHSA Leadership and Governance Committee.

We have one opening for members representing the Parent group. PHSA is proud of its membership, our strengths and our diversity. The Leadership and Governance committee encourages every program's strongest leaders to consider being nominated in the appropriate group.

The PHSA Bylaws define the groups as follows (Article V, Section 2):

- **Parents** – the parent membership group shall consist of parents or guardians of children currently enrolled in a Pennsylvania Head Start/Early Head Start program. Candidates for election to the Board must submit to the PHSA Board a Board Candidate Program Endorsement Form, in advance, which has been completed and signed by the Administrator of their program.
- **Staff** – the Staff membership group shall consist of all Head Start/Early Head Start staff other than Administrators, coming from a grantee, delegate or single purpose agency.
- **Administrators** - the Administrators membership group shall consist of any individual within the State of Pennsylvania who holds an Administrator position having operating responsibility for a Head Start/Early Head Start grantee, delegate, or Single Purpose agency.
- **Friends** – the Friends membership group shall consist of members of the community who have an interest in the Head Start/Early Head Start mission and purpose. This group shall include Head Start alumni. For the purpose of electing representatives from the Friends group to the PHSA Board, Friends shall have voting privileges.

## Candidates:

Candidates must complete the appropriate forms to be eligible for nomination in this election. These forms are:

- The program endorsement (required for parents and staff nominees only)
- The candidate profile (all nominees).

Board member responsibilities and necessary forms to submit a completed nomination are included below.

Please feel free to contact the PHSA Leadership and Governance Committee at [stateoffice@paheadstart.org](mailto:stateoffice@paheadstart.org) if you have any questions.

Respectfully,

Blair Hyatt  
PHSA Executive Director



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## **PHSA BOARD MEMBER RESPONSIBILITIES**

1. Maintain email address and read PHSA emails at least once a week.
2. Remain informed on issues affecting Head Start and the Early Care and Education community.
3. Attend PHSA Board meetings four times a year.
4. Attend Annual Spring Conference and Fall Early Childhood Summit.
5. Remain in good standing with their local Head Start program.
6. Actively serve on a minimum of one PHSA Board committee.
7. Act ethically and appropriately at all PHSA functions.
8. Represent the best interests of PHSA at all PHSA functions.
9. Come to meetings prepared having read materials sent to members in advance.
10. Be informed about the organization's mission, services, policies and programs.
11. Inform others about the organization.
12. Follow conflict of interest and confidentiality policies.
13. Communicate promptly with PHSA staff and refrain from making special requests of the staff.



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## PHSA BOARD CANDIDATE PROFILE

(To be completed for all candidates)

Name \_\_\_\_\_

Group to be represented    \_\_\_ Administrators    \_\_\_ Parents    \_\_\_ Staff    \_\_\_ Friends

Delegate or Grantee \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

**Candidate Information:** On a separate sheet, please explain why you want to become a PHSA Board member, including the strengths that you believe that you would bring to the Board (250 word maximum).

### Candidate Representations:

- I have a signed support endorsement form from my program director (required for staff and parents only).
- I am a member of my program's Policy Council (required for parents only).
- I am committed to fulfilling the PHSA Board members responsibilities as described on the attached sheet.
- I have my own email account and will have the ability to access and read PHSA Board emails regularly.
- I understand that my program will need to pay its 2020 PHSA dues (Administrators, Staff and Parents)
- I have paid my 2020 PHSA dues (friend).

\_\_\_\_\_  
Signature of Candidate:

\_\_\_\_\_  
Date:

**Email to:**    awolff@lakeshorelearning.com

**Mail to:**    PHSA 415 Market St. Suite 206A Harrisburg, PA 17101



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## PHSA Board Candidate Program Endorsement Form

(To be completed by candidates in the Staff and Parent Group)

DELEGATE OR GRANTEE: \_\_\_\_\_

Candidate's Member Group: \_\_\_\_\_ Staff \_\_\_\_\_ Parent

Candidate's Name: \_\_\_\_\_

Candidate's Title: \_\_\_\_\_

Candidate's Mailing Address: \_\_\_\_\_

Candidate's Email Address: \_\_\_\_\_

*My program is a current dues paying member of the PHSA, and I endorse the above-named representative to serve on the PHSA Board of Directors. If elected, I will support the representative's attendance at PHSA meetings and Conferences as well as his or her completion of duties and tasks associated with Board service. This support includes travel, food, registration and lodging expenses. I am aware that the PHSA Board meets four times a year as follows:*

When	What	Location	Length of Activity
Quarterly	Board Meetings	Varies	Usually 1 day, occasionally 1.5 days
Spring and Fall	PHSA Conference & ECE Summit	Varies	1.5 and 3 days

\_\_\_\_\_  
*Signature of Program Director*

\_\_\_\_\_  
*Date*

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