COMMUNITY SERVICE PROJECT TITLE: The Educator Classroom Outreach Project

ZONE REPORTING EASTERN UNIT (s): Upper Montgomery CT

PROJECT DESCRIPTION- MAIN FEATURES:

A two-hundred dollar grant is awarded annually to 1 of the 4 school districts in our unit on a rotating basis. Teachers from that district submit proposals in the fall after receiving our letter. A committee of the unit then meets to decide which proposal will be funded. The award is presented to the teachers and the administration during American Education Week in Nov. with coverage in the local newspapers.

CONTACT PERSON: Please provide name and phone number for the person(s) who has/have the best **working** knowledge of this project.

Name: Pat Galeazza, Fultonville NY Phone (518) 853-4308

E-mail: peggal@frontiernet.net

TIME-FRAME for the event or project: (How long did it take from start to finish?) 3-5 hours in planning: 3-5 hours in implementation.

RESOURCES NEEDED: Please include estimate of the cost and any resources donated. Money for the award is obtained from funds raised through raffles done at our regular luncheon meetings in the spring and fall. We solicit donations from local merchants and other items provided by members for the raffle.

CHALLENGES THAT MADE COMPLETION OF THE PROJECT DIFFICULT: (a tip to share?) No real challenges; I have been in charge of this for three years. It is a feel-good project and keeps the idea alive that retired educators continue to be supportive of schools in the community from which they retired.

NATURE OF PUBLICITY RECEIVED: Please attach any news releases or photos of the event.

We don't have one to include but each year there has been a photo op with winning teacher/administrator.

Ask to have it placed in the district newsletter as well for additional public relations value.

APPROXIMATE # OF YEARS the project has been sponsored by the unit/zone. This is the second cycle in 2011; all four schools have had an award previously and now the next cycle has begin this fall.

OTHER ORGANIZATIONS with whom you partnered on this event or project. NONE

PLAN TO CONTINUE THE PROJECT? Yes X No If continuing, please describe if there are also any plans to expand the project.

COMMUNITY SERVICE PROJECT TITLE: Financial Donations to Local Organizations

ZONE REPORTING : EASTERN UNIT(s): ALBANY RTA

PROJECT DESCRIPTION- MAIN FEATURES: Each year the Albany RTA makes three or four donations of \$500 each from their treasury to not for profit worthy local groups such as food pantries, Parsons Family Center etc.

CONTACT PERSON: Please provide name and phone number for the person(s) who has/have the best **working** knowledge of this project.

Name: Margaret King

Phone 518-489-1341

E-mail: mlking70@nycap.rr.com

TIME-FRAME for the event or project: (How long did it take from start to finish?) Minimal time spent. RTA sponsored activities fund the donations.

RESOURCES NEEDED: Please include estimate of the cost and what was donated. Money

CHALLENGES THAT MADE COMPLETION OF THE PROJECT DIFFICULT: (a tip to share?)

Many organizations are worthy but our resources are limited.

NATURE OF PUBLICITY RECEIVED: Please attach any news releases or photos of the event.

We receive thank you notes but don't actively publicize.

APPROXIMATE # OF YEARS the project has been sponsored by the unit/zone. 10+.

OTHER ORGANIZATIONS with whom you partnered to sponsor this event or project? None.

PLAN TO CONTINUE THE PROJECT? Yes X No If continuing, please describe if there are also any plans to expand the project.

COMMUNITY SERVICE PROJECT TITLE: RELAY FOR LIFE WALK

ZONE REPORTING EASTERN UNIT(s): SARATOGA RTA

PROJECT DESCRIPTION- MAIN FEATURES:

Walkers were organized to participate in the event. The unit also contributed \$200.00 for signage along the walk route.

CONTACT PERSON: Please provide name and phone number for the person(s) who has/have the best **working** knowledge of this project.

Name: Gail Brownell

Phone (518)-371-6081

E-mail

TIME-FRAME for the event or project: (How long did it take from start to finish?)

Time was given at several Saratoga RTA monthly meetings. Certain organizers also attended the Relay for Life Committee meetings

RESOURCES NEEDED: Please include estimate of the cost and what resources if any were donated.

\$200 was donated from our treasury by vote of the membership of Saratoga RTA.

CHALLENGES THAT MADE COMPLETION OF THE PROJECT DIFFICULT: (a tip to share?)

Getting people to walk.

NATURE OF PUBLICITY RECEIVED: Please attach any news releases or photos of the event.

Our RTA had signage along the walk route. No other.

APPROXIMATE # OF YEARS the project has been sponsored by the unit/zone. One. Saratoga RTA votes yearly as to which community service projects it will support.

OTHER ORGANIZATIONS with whom you partnered on this event or project. The sponsoring partner, Relay for Life.

PLAN TO CONTINUE THE PROJECT? Yes__ No__ X If continuing, please describe if there are also any plans to expand the project.

COMMUNITY SERVICE PROJECT TITLE: Holiday gifts for Nursing Home Residents

ZONE REPORTING EASTERN UNIT(s): Saratoga RTA

PROJECT DESCRIPTION- MAIN FEATURES:

Holiday cookies were baked by retired educator volunteers, Christmas plants were purchased along with fleece robes. All items were given to nursing home residents.

CONTACT PERSON: Please provide name and phone number for the person(s) who has/have the best **working** knowledge of this project.

Name: Suzanne Whitney Phone (518)-584-8775

E-mail

TIME-FRAME for the event or project: (How long did it take from start to finish?)

RESOURCES NEEDED: Please include estimate of the cost and what resources if any were donated. 48 fleece throws were purchased for \$6.00 each. Donations from members covered that cost. Cookies and funds for plants were donated by members as well.

CHALLENGES THAT MADE COMPLETION OF THE PROJECT DIFFICULT: (a tip to share?) Obtain a single person as the nursing home contact. Check stores for sales on fleece throws.

NATURE OF PUBLICITY RECEIVED: Please attach any news releases or photos of the event. None

APPROXIMATE # OF YEARS the project has been sponsored by the unit/zone-One

OTHER ORGANIZATIONS with whom you partnered? None

PLAN TO CONTINUE THE PROJECT? Yes No \underline{X} If continuing, please describe if there are also any plans to expand the project. The group changes the projects each year

COMMUNITY SERVICE PROJECT TITLE: ADOPT A SOLDIER ITEMS COLLECTION

ZONE REPORTING EASTERN

UNIT(s): SARATOGA RTA

PROJECT DESCRIPTION- MAIN FEATURES:

Each month at four meeting (Saratoga RTA meets monthly except for July and August) we collected items to send to American troops serving abroad). In each monthly newsletter people were reminded of the types of items desired such as toiletries-soap, lotion, toothpaste, shampoo etc.

CONTACT PERSON: Please provide name and phone number for the person(s) who has/have the best **working** knowledge of this project.

Name:

Carol Rigano

Phone 518-587-3768

E-mail

TIME-FRAME for the event or project: (How long did it take from start to finish?)
Several planning sessions occurred and item donations were collected at four of the monthly meetings.

RESOURCES NEEDED: Please include estimate of the cost and what resources if any were donated.

<u>All</u> items were donated by unit members. Adopt a Soldier representatives sent the items that we had collected.

CHALLENGES THAT MADE COMPLETION OF THE PROJECT DIFFICULT: (a tip to share?)

A tip is to remind people via newsletters or e-mail blasts as to what is needed, by when and where to bring them. In this case, we collected items at each of four meetings. We were relieved of any obligation to send materials since Adopt a Soldier did that for the troops.

NATURE OF PUBLICITY RECEIVED: Please attach any news releases or photos of the event. None

APPROXIMATE # OF YEARS the project has been sponsored by the unit/zone- One. The Saratoga RTA Community Service Committee suggests different projects each year and members vote to indicate which they will support.

OTHER ORGANIZATIONS with whom you partnered on this event or project.

PLAN TO CONTINUE THE PROJECT? Yes__ No \underline{X} (see above for reason) If continuing, please describe if there are also any plans to expand the project.

COMMUNITY SERVICE PROJECT TITLE: LITERACY NEW YORK 5 K READ/RUN RACE

ZONE REPORTING: EASTERN UNIT(s): SARATOGA, SCHNECTADY RTA, AND EZ.

PROJECT DESCRIPTION- MAIN FEATURES:

Literacy NY Greater Capital Region partnered with an official runners' race registry association to sponsor a 5 K Walk/Run for the benefit of literacy held in Saratoga, NY on June 13, 2010. Saratoga RTA played a minor role as one of many community groups that supported the race financially with a \$200 donation for signage on the race route as well as a \$200 donation for tutor materials. Five volunteers helped either with registration or as street marshalls on the day of the race. Eastern Zone Retired Teachers' gave a \$200 donation because it covers the 5 counties represented in the race's benefit literacy audience. Schnectady RTA donated \$100.

CONTACT PERSON: Please provide name and phone number for the person(s) who has/have

the best working knowledge of this project.

Name: Jennifer Gardella

Phone 518-842-8024

E-mail: gardella15@gmail.com

TIME-FRAME for the event or project: (How long did it take from start to finish?)
For the RTA only two meetings and one e-mail blast to obtain financial support and enlist volunteers.

RESOURCES NEEDED: Please include estimate of the cost and what was donated.

Saratoga RTA bought signage along the route and delivered 5 people to work on the day of the race. It donated \$400 from its RTA treasury to be one of many sponsors.

The Eastern Zone Executive Board donated \$200 for signage along the race route while Schenectady County RTA donated \$100 that helped to provide scholarships for students who wanted to run but could not afford to register for it. \$700 total was a respectable donation from these not-for-profit groups.

CHALLENGES THAT MADE COMPLETION OF THE PROJECT DIFFICULT: (a tip to share?) When acting as a partner in a large endeavor, make sure that your RTA can deliver what it promised. This particular group is willing to spend money to support and event while getting retirees to actually work on one has been much more difficult. Literacy NY was happy to have a \$400 donation and people to assist on the day along with many other community residents.

NATURE OF PUBLICITY RECEIVED: Please attach any news releases or photos of the event. Saratoga RTA had signage along the route and Eastern Zone Retired Teachers did as well Also, the Saratoga RTA and Eastern Zone names were listed on the official race T-shirt as a sponsor.

APPROXIMATE # OF YEARS the project has been sponsored by the unit/zone. One. OTHER ORGANIZATIONS with whom you partnered on this event or project. Literacy NY hosted this event with several community organizations and businesses throughout a five county region. The Saratoga RTA was one of many smaller sponsors of this race for literacy.

PLAN TO CONTINUE THE PROJECT? Yes No \underline{X} If continuing, please describe if there are also any plans to expand the project.

COMMUNITY SERVICE PROJECT TITLE: FOOD PANTRY COLLECTION

ZONE REPORTING: EASTERN

UNIT(s): SARATOGA

PROJECT DESCRIPTION- MAIN FEATURES:

Unit members collected a huge amount of non-perishable foods for the Franklin Community Center and The Salvation Army food pantries.

CONTACT PERSON: Please provide name and phone number for the person(s) who has/have the best working knowledge of this project.

Sue Whitney (518)-584-8775

TIME-FRAME for the event or project: (How long did it take from start to finish?)
One meeting to discuss the outreach and gain member approval. One phone call to food panties for pick up of goods.

RESOURCES NEEDED: Please include estimate of the cost and what was donated.

All foods were donated by unit members. All you needed were people willing to bring items.

CHALLENGES THAT MADE COMPLETION OF THE PROJECT DIFFICULT: (a tip to share?) NATURE OF PUBLICITY RECEIVED: Being sure the food pantry collection people kept their schedule of pick up at the restaurant where we have our monthly meetings.

APPROXIMATE # OF YEARS the project has been sponsored by the unit/zone. One.

OTHER ORGANIZATIONS PLAN TO CONTINUE THE PROJECT? Yes___No_X If continuing, please describe if there are also any plans to expand the project. Saratoga RTA members vote yearly on which charities or organizations they will support. Causes rotate.