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 **FCCLA Chapter ID Request Form**

 **Step 1:** Please type information to this form and submit to Melissa Webb, FCCLA State Advisor,

 at mwebb@cde.ca.gov.

|  |  |
| --- | --- |
| School Name |  |
| Chapter Name: Ex. Lakewood HS FCCLA |  |
| School Type: Middle or High School |  |
| School Address  |  |
| School City, State, Zip  |  |
| School Phone |  |
| Family & Consumer Sciences Program Types: **Comprehensive Program** (concentrator courses) Ex. Foods and Nutrition**Occupational Program** (capstone courses)Ex. Advanced Culinaryor **Both** (FCS program includes both concentrator and capstone courses) | List FCS Program Type and Course Titles: |
| School Fax  |  |
| County  |  |
| Region 2, 4, 5, 6, 7, 8, 9, or 10  |  |
| Grades served |  |
| District  |  |
| Principal Name  |  |
| Principal Email  |  |
| Advisor Name  |  |
| Years Teaching FCS Courses |  |
| Years Serving as Chapter Advisor |  |
| Advisor Address  |  |
| City |  |
| State |  |
| Zip |  |
| Phone |  |
| Cell Phone |  |
| Home Email |  |
| School Email |  |
| Affiliation Type:□ Middle School Level: Total $450.00□ Regular: $18.00 per member/advisor□ Up to 25 Members: $790 plus pkg. benefits□ Unlimited Package: all FCS students in your courses: $1,550 plus pkg. benefits |  |

 **Step 2:** You will also need to complete and submit the FCCLA Chapter Participation Form which both you and your administrator will need to sign.

 **Step 3:** Melissa Webb will email you the Chapter ID number and login credentials to access the FCCLA National Advisor Affiliation Portal at [www.fcclainc.org](http://www.fcclainc.org). **(Revised 7-21-2023)**