



OUTSTANDING ADVISOR

Recognition Award Signature Form

INSTRUCTIONS

This form must be completed by the FCCLA chapter officers with the help of the applicant and uploaded to the online Outstanding Advisor Application by March 1. To be eligible for this award, applicant must be a Family and Consumer Sciences (FCS)

Education instructor who teaches at least two FCS classes, at or above the 7th grade level, for a minimum of one complete year in California. All information submitted on this form must be stated as it pertains to **March 1 – February 28**

Advisor's Name: _____ Years as an FCCLA Advisor: _____

Chapter Name: _____ Region Number _____

School Name: _____

Advisor's Email: _____

Number of affiliated members this school year: _____ previous school year: _____

Have you previously received a plaque for this award? Yes _____ No _____

CERTIFICATION: We certify that all claims and information reported in this application occurred during the current school calendar year, AND we certify that all representations made are true and accurate to the best of our knowledge.

Signature of Chapter President _____ Date: _____

Signature of Chapter Advisor _____ Date: _____

Signature of School Principal _____ Date: _____

This application must be submitted no later than March 1:

<https://docs.google.com/forms/d/e/1FAIpQLSdXHsgEsU46J6IT15F80gEzNsrmQknaaFYgkNAvbQnjiXbJuQ/closedform>