Honorary Membership Nomination

Application deadline: February 23, 2021

Attach to the application the following information typed on no more than 3 single-sided pages. Any chapter may nominate an individual for Honorary Membership.

Send completed application by February 23, 2021 to:

MN FCCLA PO 131386, Roseville, Mn. 55113

Qualifications:

The purpose of the state Honorary Membership shall be to recognize individuals who have made outstanding contributions and provided continuing service to the total state association.

Contributions of the nominee for the state Honorary Membership Award may include, but are not limited to, the following:

1. Projects/programs implemented for the state association

1. Publications authored that related to the purposes/mission of the organization
2. Materials or plans developed to help teachers and prospective teachers make FCCLA an integral part of the total curriculum statewide

4. Development of business/industry/community partnerships to support the state association.

5. Outstanding service to Region or State Association

6 Individual has helped to promote FCCLA with public relations efforts

7. Outstanding assistance in developing and carrying out a State FCCLA project

8. Support for the Region or State Association through time and/or other resources.

Instructions: Fill out and submit the application on the following page. Attach to the application the following information on no more than 3 single-sided pages. Include two letters of recommendation which speak about the qualifications.

**Application for Honorary Membership**

Nominee **name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Nominating **Chapter**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chapter contact person:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of nominator:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name and title of nominee**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address of nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home phone of nominee: \_\_(\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email of nominee:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Address of nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work phone of nominee: \_\_\_(\_\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address of nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Nominator Date

1. List the outstanding service provided by the nominee to the **Region and State Association**.

Examples: advisory committees, sponsorships, projects, PR, activities.

1. List how this individual has helped to support FCCLA.

Examples: teacher workshops, preparing future teachers, Participation with members at state, national, regional events, Fund raising, supported policies that support FCCLA, Supported legislation.

1. List the project (s) this individual has helped to carry out and support.

Example: Assistance with regional or state programs, national, state or regional efforts.

4. List leadership and service positions at the **Regional or State levels** of FCCLA.

Example: regional or state roles in FCCLA events, programs, committees, tasks that assisted FCCLA positions of the organization.

Attach two letters of recommendation which speak about the qualities mentioned above

**Send completed application by February 23 to: MN FCCLA, PO Box 131386**

 **Roseville MN 55113.**

**Evaluation for FCCLA Honorary Membership**

|  |  |  |  |
| --- | --- | --- | --- |
| Evaluation Criteria |  | Good | Excellent |
| Outstanding service provided by the nominee to the **Region**  | 0 Service was not provided to FCCLA Region | 1 Service was provided to FCCLA Region | 2 Service provided to FCCLA Region was exemplary in quality or quantity of service |
| Outstanding service provided by the nominee to the **State Association**: | 0 Service was not provided to FCCLA Association | 1 Service was provided to FCCLA Association  | 2 Service provided to FCCLA Association was exemplary in quality or quantity of service |
| Outstanding service provided by the nominee to the **National Association**: | 0 Service was not provided to FCCLA National Association | 1 Service was provided to FCCLA National Association  | 2 Service provided to FCCLA National Association was exemplary in quality or quantity of service |
| Individual has helped to support FCCLA | 0 Individual ‘s information missing | 1 Individual ‘s information has one or two examples of service to FCCLA | 2 Individuals service included 3 or more examples of service to FCCLA |
| Project (s) this individual has helped to carry out and support. | 0 Information about project is missing | 1 Project work includesinformation about gifts of time, talent or treasure ( resources) to FCCLA | 2 Project work includesinformation about gifts of time, talent or treasure (resources) to FCCLA that are exemplary |
| Leadershippositions at the**Regional levels** ofFCCLA. | 0 No leadership listed for regional level | 1 Leadership example is listed for a regional level to FCCLA | 2 Leadership role was a major role in regional FCCLA groups, regional committees and impact on regional FCCLA was exceptional |
| Leadershippositions at the**State levels** of FCCLA. | 0 No leadership listed for state level | 1 Leadership example is listed for a state level to FCCLA | 2 Leadership role was a major role in state FCCLA groups, state committees and impact on state FCCLA was exceptional |
| Leadershippositions at the**National levels** ofFCCLA. | 0 No leadership listed for state level | 1 Leadership example is listed for a national level to FCCLA | 2 Leadership role was a major role in state FCCLA groups, national committees and impact on national FCCLA was exceptional |
| List servicepositions at the**Regional levels** ofFCCLA. | 0 No service listed for regional level | 1 Service example is listed for a regional level to FCCLA | 2 Service role was a major role in regional FCCLA groups, regional committees and impact on regional FCCLA was exceptional |
| Service positions at the**State levels** of FCCLA. | 0 No service listed for state level  | 1 Service example is listed for a state level to FCCLA | 2 Service role was a major role in state FCCLA groups, state committees and impact on state FCCLA was exceptional |
| List servicepositions at the**National levels** ofFCCLA. | 0 No service listed for regional level | 1 Service example is listed for a regional level to FCCLA | 2 Service role was a major role in regional FCCLA groups, national committees and impact on national FCCLA was exceptional |
| Letters of recommendation  | 0 none provided  | 1 One letter is provided. Letters are provided but are limited in recommendation. | 2 Letters are provided that give example to the excellent quality of the contribution. |
| Total |  |  |  |