



CHAPTER DEGREE

Application

Goal A: Individual

(Must provide evidence *one* activity and/or event)

Personal Goal:

Accomplished Goal: (Use Planning Process)

Why Important:

Adviser Signature	Date
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Goal B: Family

(Must provide evidence of **3** activities and/or event)

Date	Describe Activity	Benefits of Activity

Family Member Signature	Date
Family Member Signature	Date
Family Member Signature	Date

Goal C: FCCLA Chapter

(Must provide evidence of **3** activities)

Date	Describe Activity	Benefits of Activity

Adviser/Officer Signature	Date
Adviser/Officer Signature	Date
Adviser/Officer Signature	Date

Goal D: School

(Must provide evidence of **3** activities)

Date	Describe Activity	Benefits of Activity

School Personnel/Adviser/Coach Signature	Date
School Personnel/Adviser/Coach Signature	Date
School Personnel/Adviser/Coach Signature	Date

Goal E: Community

(Must provide evidence of 3 activities)

Date	Describe Activity	Benefits of Activity

Person In Charge Signature	Date
Person In Charge Signature	Date
Person In Charge Signature	Date

Goal F: Careers

Career Development Event

(STAR Event – does not have to compete above the local level or above - Must provide evidence)

Adviser Signature	Date
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Goal G: Promote Family and Consumer Sciences Education or related career field

(Must provide evidence)

Family and Consumer Sciences Course/ Related Career Field:

Project Planned and implemented: (Use Planning Process)

Public Relations:

Adviser Signature	Date
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