



NEVADA ASSOCIATION FCCLA

**FRIENDS OF FCCLA AWARD
NOMINATION FORM**

Return this form to the State Adviser at the State Office by February 1
Karen Chessell, State Adviser
755 North Roop Street, Suite 201
Carson City, NV 89701

The _____ Chapter nominates _____
of _____ for the Nevada Friends of FCCLA Award.

Chapter President

Chapters may nominate those individuals they feel have made an outstanding contribution to Nevada youth and who have been supportive of FCCLA.

Chapters submitting a nomination must include, with the attached application, the following written documentation:

1. Contributions the individual has made toward the purposes and ideals of FCCLA.
2. Personal qualifications of applicant (relationships with students, peers and community).
3. Letters of recommendation from a chapter FCCLA adviser and a chapter member.