Instructions: Tab to get from one field to next, and/or

from one line to the next.

## Kansas Family, Career, and Community Leaders of America **Administrator of the Year Award Nomination Form**

(Revised January 2025)

This application must be emailed to <a href="mailto:sdandres@ksu.edu">sdandres@ksu.edu</a> no later than **February 20th**:

Please note that the Administrator of the Year award will be presented to one school administrator employed at a Kansas school with an FCCLA chapter. One individual will receive this award each year.

Nominee's Name:	School:		
Docition/Title of Naminae:			
Person(s) Nominating:			
School Address:			
City/State/Zip:			
Phone:			
Contact Email:			
Please answer all of the following quelease complete the corresponding some Questions that receive a "no" answer application must contain at least four	section of the application, justifying require no additional information.	g the ansv	wer of "yes."
1. Has the nominee supported F	CCLA activities and projects?	Yes:	No:
2. Has the nominee supported/e	ncouraged FCCLA advisers?	Yes:	No:
3. Has the nominee supported/e	ncouraged individual students?	Yes:	No:
4. Has the nominee supported/in	fluenced FCCLA membership?	Yes:	No:
5. Has the nominee promoted F0	CCLA in the community?	Yes:	No:
6. Has the nominee supported ca	areer and technical education?	Yes:	No:
Please note the following:			

- o Attach one letter of recommendation as to why the nominee should receive this honor. These letters may be from an adviser, chapter officer, chapter member, district adviser, school administrator, community member, et cetera.
- This application is judged based upon quality, not quantity.
- DO NOT ALTER THE FORMAT OF THIS APPLICATION, AND PLEASE TYPE **EVERYTHING IN AN ARIAL 12-POINT FONT.**

,	1.	Please discuss the nominee's support of FCCLA activities and projects
2	2.	Please discuss the nominee's support of FCCLA advisers
3	3.	Please discuss the nominee's support of individual students
2	4.	Please discuss the nominee's encouragement of FCCLA membership

5.	Please discuss the nominee's promotion of FCCLA in the community
6.	Please discuss the nominee's support of career and technical education

## 7. <u>Kansas Family, Career, and Community Leaders of America</u> <u>Administrator of the Year Award Scorecard</u>

Please note that this scorecard should be mailed in with the completed application, but that it should not be altered or filled out in any way prior to it being mailed out. This scorecard is for evaluation committee use only! In addition, please note that this scorecard will be returned in its completed form to the address included on the first page of the application after the application has been evaluated, regardless of the nominee's status in rank or receipt of the award. Finally, please note that the grading scale used on this application will be one in which a "10" is the highest rank possible for any completed section of the application, a "1" the lowest, and all sections left incomplete will receive a ranking of "N/A."

Name of Candidate:

Criteria	10	9	8	7	6	5	4	3	2	•
Activities, Projects Support										
Adviser Support										
Individual Student Support										
Membership										
Community										
Technical Education										
One Recommendation  mments:										