Kansas Family, Career, and Community Leaders of America Novice Adviser of the Year Award Nomination Form

This application must be emailed to sdandres	@ksu.edu by Februa	ry 20th.			
Please note that an adviser must have be	en advising for only	/ 3 years or less to			
qualify for this award.	, on advising ioi oin,	, • ,•• •••• ••			
Nominee's Name:	School:				
Person(s) Nominating:					
School Address:					
City/State/Zip:					
Phone:	Fax:				
Contact Email:					
How Many Years Has the Nominee Been an	FCCLA Adviser:				
Please answer all of the following questions					
answer please complete the corresponding					
answer of "yes." Questions that receive a "no					
To be considered, the application must conta	in at least five "yes" an	iswers.			
Has the nominee encouraged FCCLA	membershin?	Yes: No:			
Has the nominee encouraged national	<u>-</u>	Yes: No:			
3. Has the nominee encouraged STAR E	. •	Yes: No:			
5. Has the nominee served on SLC, State	•	Yes: No: Yes: No:			
6. Has the nominee encouraged candida	•	Yes: No:			
7. Has the nominee promoted Fall Leade		Yes: No:			
8. Has the nominee promoted State Lead		Yes: No:			
9. Has the nominee created a strong rela	•				
chapter members and their parents?	,	Yes: No:			
10. Has the nominee communicated with o	chapter members				
about upcoming FCCLA opportunities?		Yes: No:			

Please note the following:

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

1.	Please discuss the nominee's work with encouraging FCCLA membership
2.	Please discuss the nominee's work with promoting national programs work
3.	Please discuss the nominee's work with encouraging STAR Events participation
4.	Please discuss the nominee's work with planning/carrying out chapter activities

5.	Please discuss the nominee's work with SLC, State Board, etc.
6	Please discuss the nominee's work with encouraging FCCLA office candidacy
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7	Diagonalia ayaa tha mamain aa'a yyank yyith maanatina Fall I aadanahin Canfaranaa
1.	Please discuss the nominee's work with promoting Fall Leadership Conference.
8.	Please discuss the nominee's work with promoting State Leadership Conference.

 Please discuss the relationship between the nominee, her students, an parents. 	d their
10. Please discuss how the nominee communicated with students and kep updated and informed.	t them

<u>Novice Adviser 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:	
School:	

Criteria	10	9	8	7	6	5	4	3	2	1
Encourage Membership										
National Programs										
STAR Events										
Plan/Carry Out Chapter Activities										
SLC, State Board, Et Cetera										
FCCLA Office Candidacy										
Fall Leadership Conference										
State Leadership Conference										
Relationship with Students										
Communications										
One Recommendation										

Comments:			