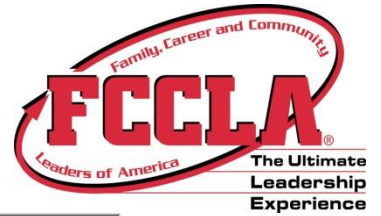


# FERGUS FCCLA OFFICER APPLICATION



NAME  AGE

HOME MAILING ADDRESS

CITY, STATE ZIP

PHONE NUMBER  CURRENT YEAR IN SCHOOL

PAST EXPERIENCE AND/OR INVOLVEMENT WITH FAMILY, CAREER AND COMMUNITY LEADERS OF AMERICA

FAMILY AND CONSUMER SCIENCES EDUCATION CLASSES TAKEN OR CURRENTLY TAKING (STATE WHETHER SEMESTER OR YEAR-LONG).

REASON FOR SEEKING AN OFFICE.

WHAT WILL YOU PERSONALLY DO TO MAKE FERGUS FCCLA CHAPTER AN ACTIVE GROUP?

HOW CAN WE MAINTAIN CHAPTER ENTHUSIASM THROUGH THE ENTIRE SCHOOL YEAR?

PARTICIPATION IN OTHER ACTIVITIES (SCHOOL, CHURCH, COMMUNITY, WORK, ETC.)

OFFICES AND POSITIONS HELD IN OTHER GROUPS.

IT COSTS A LOT OF MONEY TO MAINTAIN THIS CHAPTER. WHAT FUNDRAISING IDEAS DO YOU HAVE THAT WOULD BE NEW AND UNIQUE FOR OUR CHAPTER.

CHECK THE OFFICES YOU ARE INTERESTED IN:

PRESIDENT

VICE PRESIDENT

SECRETARY/TREASURER

STUDENT COUNCIL

MEDIA RELATIONS

SIGNATURE

DATE