



2019 Honorary Membership Nomination - Organization

Due **MARCH 1st**

To be returned to: Idaho FCCLA
P.O. Box 83720
Boise, ID 83720-0095

FAX (208) 334-2365
FCCLA@cte.idaho.gov

The _____ Chapter of the Idaho Association wishes to nominate:

Organization _____

Address _____

City, ST, Zip _____

for Honorary Membership in the Idaho Association Family, Career and Community Leaders of America.

We submit the following evidence that the person nominated has: *(be specific as to what the person did; date, place, etc.)*

☐ Rendered outstanding service for Family and Consumer Sciences and for Family, Career and Community Leaders of America which has reached beyond the local chapter. *(Describe)*

☐ Has helped to encourage the promotion of Family and Consumer Sciences and Family, Career and Community Leaders of America. *(Describe)*

☐ Provided outstanding assistance in developing or implementing local chapter projects. *(Describe)*

Submitted by:

Chapter Adviser (please print) _____

Chapter Adviser Signature _____ Date _____

****If selected, chapter will invite to banquet and pay meal cost.****