



FCCLA Chapter Leader Application

Name: _____ Course Name: _____

Grade in School: _____ Grade Point Average: _____ Years as an FCCLA Member: _____

FCCLA leadership position desired:

1st choice: _____ 2nd choice: _____

FCCLA activities and accomplishments:

Activities and accomplishments in school, community groups, and other youth organizations:

Write a short paragraph telling why you would like to hold an FCCLA leadership position.

I realize assuming a leadership position requires extra time and effort, and I am willing to spend the extra time and effort necessary to complete all duties of my leadership position.

Signature of Applicant: _____ Date: _____