

Five Unit Recognition Application

Students: Use this form for recognition when you have completed all five Power of One units. Please print or type all information. Turn in the completed form to your adviser.

Advisers: Once you have verified that students have completed all five Power of One units, submit student names through the FCCLA Affiliation Portal by March 1st for state and national recognition.

This form does NOT need to be submitted to the Michigan or National FCCLA offices.

National membership dues must be received by March 1st for students to qualify for recognition.

Participant Information

Member Name:

Adviser Name:

School Name:

School Address:

City: State: Zip:

School Phone: Fax:

Current Grade in School: E-mail Address:

Unit: A Better You

Project Title: Date Approved:

Description and accomplishments:

Unit: Family Ties

Project Title: Date Approved:

Description and accomplishments:

Unit: Working on Working

Project Title: Date Approved:

Description and accomplishments:

Unit: Take the LeadProject Title: Date Approved:

Description and accomplishments:

Unit: Speak Out for FCCLAProject Title: Date Approved:

Description and accomplishments:

I certify the above student has met the national membership requirements and has completed all five Power of One units.

Chapter Adviser Signature: Date: