

Distinguished Service Award Nomination

State FFA Application

Application Information

This form is to make a nomination for the State Distinguished Service Award. One nomination can be made per chapter per year. The State FFA Executive Board can nominate up to two organizations, agencies, business or other groups and up to two recipients will be selected through chapter nominations. State Distinguished Service is for <u>organization</u>, <u>agencies</u>, <u>businesses</u>, or other <u>groups</u>.

THIS APPLICATION MUST BE COMPLETED BY AN ADVISOR.

Date of Convention to be Awarded *								
<u>₩</u>								
Month Day Year								
Individual Information								
This information pertains to the Chapter Advisor completing this form. All information on this page is in relation to the chapter FFA advisor.								
Name *								
First Name Middle Name Last Name								
Personal Phone *								
Personal Email *								

School & Chapter Information

School Name *	
School Phone *	
School Address	
Street Address	
Street Address Line 2	
City	State
Zip Code	
Chapter Name *	
Chapter Number *	

Award Information

Name of Nominated Organization *

Organization, Agency, Business, Industry, etc.							
Address of Nominated Organization *							
Street Address							
Street Address Line 2							
City State							
Zip Code							
Main Contact at Organization *							
Prefix First Name Last Name							
Title of Main Contact *							
Email of Main Contact *							
Be sure this email is used by the contact.							
Phone Number of Main Contact *							

Nomination Writing

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CX	piairi	major	CONTRIBUTIONS	made to th	e aq c	a Program	/FFA (Jiiapter	••

min. 60 words/max. 180 words0/180

Discuss contributions made to local chapter which impact the State FFA Association *

min. 60 words/max. 180 words0/180

Advisor Certification

Advisor Key *

Use the Advisor Key provided by the State to access the signature section.

Certification *

I certify that I am the advisor to the chapter named on this application form and have provided my signature below.