

Chapter FFA Degree Application

As you complete each of the following requirements for the Chapter FFA Degree, place a check in the box and write the date on the line to the right.

NAME:		Date Submitted:	Date Submitted:	
CHAPTER:		Due Date:	_ Due Date:	
Requir	rement for D	egree	Date Completed	
		reenhand FFA Degree. e was confirmed:		
		tly enrolled or will be enrolled in an agricultural education course during school year.		
		essfully completed the equivalent of 180 hours of systematic school instruction the 9 th grade level.		
	continued g growth and	eration an approved supervised agricultural experience program with plans for growth and improvement. I have submitted a description of my SAE and my SAE improvement plan to my advisor or I will print a copy of the application and by of my SAE plan prior to submission.		
		cipated in the planning and conduction of at least three official functions in the gram of activities. List activities below:		
	1.			
	2.			
	3.			
	earned and	y own efforts, after entering Ag Education and through my SAE program, productively invested \$150 or worked a minimum of 45 hours outside of heduled class time; or a combination thereof.		
	investment	nitted my record books or financial summary documenting my earnings and to my advisor or I will print the application and attach the documentation on d investment prior to submission.		
	I have effec	tively led a group discussion for 15 minutes.		
	When:	Topic:		

FOR (I/We I	CHAPTER USE have reviewed this application and certify that the candidate has met the requirements hapter Degree. er President or Chapter Membership Committee Chairperson	and will be awarded the Date:
FOR (nave reviewed this application and certify that the candidate has met the requirements	and will be awarded the
	CHAPTER USE	
Memb		
Memb		
	per's Signature:	Date:
Havin	g met these requirements, I hereby submit this application for the Chapter FFA Degree.	
	Application to my advisor.	
	I have submitted my application electronically or I will submit a printed copy of the	
	Activity name: # of Hours: Activity name: # of Hours:	
	Activity name: # of Hours:	
	I have participated in at least 10 hours of community service activities above and beyony SAE hours.	ond
	I have a satisfactory scholastic record. GPA:	
	List areas:	
	I have shown progress toward individual achievement in FFA Award Program.	
	5.	
	4.	
	3	
	2.	
	List procedures below: 1	