

**Kansas Family, Career, and Community Leaders of America**  
**Active Chapter Report Application**  
(Revised 7/2015)

This form must be mailed to the address below no later than **June 1**.

Pam Lamb, FCCLA State Adviser Kansas State Department of Education 900 Jackson – Suite 653 Topeka, Kansas 66612-1182
---

Please note that the Active Chapter Report is a form that is required of all chapters annually. These forms are used at the state department to compile reports that prove the activeness of Kansas FCCLA chapters, assisting the state association in maintaining organization and program funding. A State Executive Council representative will recognize all chapters for completing this form at their district's Fall Leadership Conference. This form does not need to be completed if your chapter chooses to complete the application for the Chapter Spotlight award.

USD Number: \_\_\_\_\_ School: \_\_\_\_\_  
Adviser's Name: \_\_\_\_\_ District: \_\_\_\_\_  
School Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Contact Email: \_\_\_\_\_  
Number of years of FCCLA Advising \_\_\_\_\_ Number of Chapter Members \_\_\_\_\_  
Percent of Chapter Population to School Population \_\_\_\_\_

Please answer all of the following questions to the best of your ability. If you feel that your chapter has made significant accomplishments that are not noted by this form's format, please discuss those accomplishments on no more than one additional sheet of paper. If you would like to include proofs (newspaper articles, photographs, et cetera) of your chapters activities discussed on this form, please feel free to do so. They must be mailed in with the hardcopy of the application and they will not be returned. This application is judged based upon quality, not quantity. **Everything on this form must be TYPED in an Arial 12-Point and the application's form may not be altered in any way.**

1. Indicate the number of members in your chapter that completed the following  
Step One: \_\_\_\_\_ Working on Working: \_\_\_\_\_  
Speak out for FCCLA: \_\_\_\_\_ A Better You: \_\_\_\_\_  
Take the Lead: \_\_\_\_\_ Family Ties: \_\_\_\_\_
2. Indicate the number of members in your chapter who participated in the following meetings  
Take AIM: \_\_\_\_\_ State Leadership Conference: \_\_\_\_\_  
National Fall Conference: \_\_\_\_\_ District Elections: \_\_\_\_\_

National Leadership Conference: \_\_\_\_ District STAR Events: \_\_\_\_  
District Fall Leadership Conference: \_\_\_\_

3. Please explain how your chapter participated in each of the above meetings.

4. Indicate your chapter's work with each the following national programs

Families First: \_\_\_\_

Student Body: \_\_\_\_

Power of One: \_\_\_\_

STOP the Violence: \_\_\_\_

FACTS: \_\_\_\_

Career Connection: \_\_\_\_

Community Service \_\_\_\_

Financial Fitness: \_\_\_\_

5. Explain how your chapter worked with each of the above national programs.

6. Indicate the number of persons from your chapter represented on the following

Chapter Officer Team: \_\_\_\_

District Officer Team: \_\_\_\_

State Peer Education Team: \_\_\_\_

State Officer Team: \_\_\_\_

State Executive and Advisory Council: \_\_\_\_

National Officer Team: \_\_\_\_

State Board of Directors: \_\_\_\_

7. Indicate the number of persons from your chapter represented at the following  
District STAR Events: \_\_\_\_ State STAR Events: \_\_\_\_  
National STAR Events: \_\_\_\_ Evaluators/Consultants: \_\_\_\_
8. Discuss actions of your chapter to promote the state theme, "SEA Yourself with FCCLA"
9. Explain how your chapter recruited members throughout the year.
10. Explain how FCCLA is integrated in the FCS curriculum and classroom.