



## STATE FFA Degree Application - 2014

Name: \_\_\_\_\_ Area of S.A.E.: \_\_\_\_\_  
(see National Proficiency categories)  
Address: \_\_\_\_\_ Placemt-P or Entrepreneurshp-E: \_\_\_\_  
\_\_\_\_\_ Specific Activity: \_\_\_\_\_  
Chapter: \_\_\_\_\_ Amount Supervised Agriculture Exp.  
Advisor: \_\_\_\_\_ Earnings / Investment: \$ \_\_\_\_\_  
Age: \_\_\_\_\_ Hours Outside Class Devoted to  
Date became active FFA member: \_\_\_\_\_ Supervised Agriculture Exp.: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Comm. Srv. Hrs/# Activities \_\_\_\_ / \_\_\_\_

Why do you wish to receive a State FFA Degree? (Please continue on additional page if needed)

**Please verify that you have fulfilled the State FFA Degree requirements listed on the reverse side of this form, sign reverse side of form, obtain signature of principal or director, and return to your FFA Chapter President. THIS FORM MUST BE RETURNED TO YOUR FFA CHAPTER ADVISOR BEFORE MARCH 27, 2014! IF STATE STAR APPLICANT, RETURN TO CHAPER ADVISOR BEFORE MARCH 6, 2014!**

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### **FOR REVIEW MEMBERS ONLY:**

Principal/Director:

I have reviewed the applicant's scholastic record and certify it to be satisfactory:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Chapter President, Advisor, and State FFA Advisor:

We have examined this application and recommend the above candidate for the State FFA Degree.

\_\_\_\_\_  
Chapter President

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chapter Advisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
State FFA Advisor

\_\_\_\_\_  
Date

**Applicant Verification of Completion of State FFA Degree Requirements**

Please check off the requirements which you have completed toward fulfillment of the State FFA Degree and sign:

- \_\_\_\_\_ Have paid current FFA dues (or school has purchased leadership packets including my membership)
- \_\_\_\_\_ Have received Chapter FFA Degree
- \_\_\_\_\_ Have been active FFA member for at least two years or have completed an entire technical agriculture / natural resources program of at least 360 hours by the end of the same year.
- \_\_\_\_\_ Have completed equivalent of at least two years' (360 hours) instruction in agricultural education courses at or above ninth grade level, including a Supervised Agricultural Experience
- \_\_\_\_\_ Have earned and productively invested at least \$1,000 by own efforts from Supervised Agricultural Experience or have worked (other than class scheduled time) at least 300 hours in a directed laboratory experience program or a combination thereof (total of # hours x 3.33 + number of dollars = at least 1,000)
- \_\_\_\_\_ Have demonstrated leadership ability by: performing ten procedures of parliamentary law, by giving a six minute speech, AND by serving as an officer, committee chairperson, or participating member of a chapter committee
- \_\_\_\_\_ Have participated in the planning and completion of the chapter program of activities
- \_\_\_\_\_ Have completed at least 25 Community Service Hours in at least 2 different activities
- \_\_\_\_\_ Have participated in at least five (5) FFA activities **above** the local chapter level--- please list, **including year and location** – Be specific on what you did (for example, if at a convention, list CDEs, etc.) Please do not devote more than one line to a single event (such as same year's convention or fair):

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I, the applicant for the State FFA Degree certify that the above (first page and second page check list) information is correct:

\_\_\_\_\_

Applicant signature

Date