

WA-ACTE
 FAMILY AND CONSUMER SCIENCES EDUCATORS SECTION AWARD FOR
 Outstanding Family Career and Community Leaders of America Advisor Award

The purpose of this award is to recognize an outstanding Family Career and Community Leader of America Advisor who has significantly contributed to leadership development and growth of their students at local, state and national levels. **The applicant must be an active member of FACSE, ACTE and WA-ACTE for the past three consecutive years. The applicant must be a current FCS teacher and FCCLA advisor and must have made the contribution(s) within the last five years.** Area groups and individuals are encouraged to nominate educators who are deserving of this honor. Previous nominations maybe resubmitted by updating the information

Nomination Portfolio:

A complete application follows the below application procedures. Please use this cover page as a check-off sheet to ensure all the items are included in the application.

APPLICATION PROCEDURES

<input type="checkbox"/> A title page which includes the award title, name of nominee their school, and a photograph of the nominee (5x7 glossy).
Pages 1-3: <input type="checkbox"/> Evaluation Form <input type="checkbox"/> Nomination Form <input type="checkbox"/> Endorsement Form
Pages 4-5: A brief description of no more than two pages in resume' format including: <input type="checkbox"/> Student Achievement in FCCLA <input type="checkbox"/> Years of service to FCCLA <input type="checkbox"/> Special Projects relating to FCCLA (community service not related to Nat'l programs) <input type="checkbox"/> Activities relating to FCCLA (Power of 1, STAR events, Nat'l projects, State and Nat'l officers) <input type="checkbox"/> Professional mentoring (Master adviser/Adviser Mentor)
Page 6-9: Support information should include no more than one page in resume' format in each of the four sections. Each section should involvement in Local/State and National levels. <input type="checkbox"/> (page 6) Section A: Professional Memberships and Activities (include dates) <input type="checkbox"/> (page 7) Section B: Professional Contributions (committees, publications and presentations) <input type="checkbox"/> (page 8) Section C: Education and Experience Background (to include educational preparation, work experience—including dates of service, positions held) <input type="checkbox"/> (page 9) Section D: Civic and Community Involvement (to include civic, fraternal, and/or honorary memberships, community activities and/or contributions)
Pages 10-15: Five (5) one page letters of support. These letters should come from the following individuals: <input type="checkbox"/> (page 10) Nominees immediate supervisor (CTE); <input type="checkbox"/> (page 11) Administrator; <input type="checkbox"/> (page 12) Current or former FCCLA chapter member; <input type="checkbox"/> (page13) Parent , advisory board member or community liaison; <input type="checkbox"/> (page 14) Fellow teacher, <input type="checkbox"/> (page15) one additional letter of choice (church/athletics/community group etc.)
<input type="checkbox"/> All materials word processed or typed
<input type="checkbox"/> One original and five (6) photocopied three-hole punched documents of the completed materials should be submitted.
Please note award recipients original portfolios will be submitted to WA-ACTE for State and National Recognition.

The original portfolio should be sent in a binder, however each additional copy must be three-hole punched and stapled only. All materials must be submitted with the original portfolio package and postmarked no later than **JUNE 1st**. Completed materials should be mailed to the current chairperson of the Awards Committee (*Please see Executive board link for current Awards chair www.wafacse.org*)

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FAMILY AND CONSUMER SCIENCES EDUCATORS SECTION

Outstanding Family Career and Community Leaders of America Advisor Award
(To be used by FACSE Awards Committee Members Only)
Awards Committee Evaluation Form

Name of Nominee _____
Last
First
Middle

Criteria	Points Possible	Evaluator Score
Cover Page <input type="checkbox"/> Award Name/ Nominee Name/ School/ 5x7 glossy picture	1 2 3 4	
Forms <input type="checkbox"/> Evaluation/ Nomination/ Endorsement	Yes/No	
Program Description: 1. Student Achievement in FCCLA 2. Years of service to FCCLA 3. Special Projects relating to FCCLA (community service not related to Nat'l programs) 4. Activities relating to FCCLA (Power of 1, STAR events, Nat'l projects, State and Nat'l officers) 5. Professional mentoring (Master advisor/Advisor Mentor)	1 2 3 4 1 2 3 4 1 2 3 4 1 2 3 4	
Section A: 1. Professional Memberships (FACSE/WAFACSE/ACTE/NEA/WEA) 2. Professional Association Activities (Attendance in local national and state conferences/cluster meetings/Regional meetings/Executive board/committees)	1 2 3 4 1 2 3 4	
Section B: 1. Outstanding Professional Contributions (FACSE exec board etc) 2. Publications (FCCLA documents, FACSE newsletter/ACTE news articles/Curriculum based/Frameworks etc.) 3. Presentations (State and local level workshops/promotion of FCS through presentations community/school board etc.)	1 2 3 4 1 2 3 4 1 2 3 4	
Section C: 1. Education (BS/BA/MA/PhD/Certifications/Course work in field etc.) 2. Teaching Experience (Places of work in FCS field/schools and years etc.)	1 2 3 4 1 2 3 4	
Section D: 1. Civic, Fraternal and/or Honorary Memberships (Kiwanis/Rotary etc) 2. Community Activities or Contributions (Church/Athletics/Community groups/Advisor school or extra-curricular outside of FCS)	1 2 3 4 1 2 3 4	
Letters of Recommendation <input type="checkbox"/> Immediate Supervisor (CTE) <input type="checkbox"/> Administrator <input type="checkbox"/> Current or former FCCLA Chapter member <input type="checkbox"/> Parent, advisory board member or community liaison <input type="checkbox"/> Fellow teacher <input type="checkbox"/> 1 additional letter of choice	1 2 3 4 5	
Clerical <input type="checkbox"/> Materials are word processed or typed. <input type="checkbox"/> One original and 5 photocopied and three-hole punched completed portfolio documents	Yes/No	
TOTAL	57 Points	

1= meeting one criterion 2= meeting two criterion 3= meeting three to four criterion 4= meeting greater than four criterion

Signature of Evaluator _____ Date: _____

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ENDORSEMENT FORM

Name of Nominee _____
Last First Middle

Name of Nominator _____
Last First Middle

Employment Title of Nominator _____

Home Address of Nominator _____

_____ City _____ Zip

Telephone Number: Work _____ Home _____

Email _____

Signature of Nominator _____