

ADVISOR OF THE YEAR

Nomination Form

ALL APPLICATIONS MUST BE POSTMARKED BY APRIL 1 OF AWARDING YEAR

ABOUT THE AWARD

• The selected FFA Chapter Advisor(s) will be awarded an Advisor of the Year jacket.

Name of Your Advisor: _____ Chapter: ____

- The Advisor and their students will be recognized at the Opening Session during the Alabama State FFA Convention.
- You may include additional pictures, video, and stories to further illustrate the impact of your Advisor.
- <u>RESUBMISSION</u>: If a form was submitted on behalf of your advisor for the previous year, please enter only new information you would like for the selection committee to consider. We will combine it with information from the previous year's submission. The FFA chapter representative and school administrator must, however, sign and date this year's resubmission.

Email Address:	Phone Number:	()		
Advisor Jacket Information: Circle One: Fen	nale or Male	Specific Jac	cket Size:	
1. Describe three accomplishments that your	FFA Chapter has	achieved t	this year.	
2. Please list the contests your FFA Chapter pa	articipated in thi	s year.(Loo	cal, District, Stat	e, National)

3. Please list any District, State, or National officers or candidates in your FFA Chapter this year.
4. Please tell the number of Greenhand, Chapter, State and National FFA Degree recipients from your FFA Chapter this year?
5. What role has your FFA Advisor played in these accomplishments?
5. What fole has your FFA Advisor played in these accomplishments:
6. Give three examples of how your Chapter Advisor interacts with FFA Chapter members and officers.

7. How does your Chapter Advisor encourage/assist Supervised Agricultural experiences?
8. List three ways your Chapter Advisor is involved in the school and community.
9. Why does your FFA Chapter Advisor deserve this award?

I certify that these are the views of ou	r Officer Team and FFA Chapter.		
FFA Chapter Representative:	Date:		
-	(signature)		
School Administrator:	Date:		
	Date: (signature)		
FFA Chapter Representative Conta	ct Information: We will use this information only if we have questions.		
Name:	Email:		
Please return to:			
Alabama FFA Foundation			
c/o Alabama Farmers Federation			
ATTN: Jennifer Christenberry			
P.O. Box 11000			
Montgomery, Alabama 36191-0001			
If you have any questions, please call (334) 451-2867.			
Internal Use Only:			
Received On:			

FFA Chapter:_____

FFA District:_____