



Michigan FCCLA 100% Membership Reporting Form

Chapter _____

Adviser(s) _____

We certify that the same number of members was reported on our Chapter's Affiliation Form as was reported to the Office of Career and Technical Education, Michigan Department of Education, on Form VE-4483-A, for this year's fourth Friday enrollment.

Number of students in all funded FCS/ECE/Teacher Cadet classes taught by the above teacher(s)/adviser(s) _____

Less students in more than one funded class _____

Equals non-duplicated enrollment _____

Number submitted on form VE-4483-A _____

Number of paid high school FCCLA members submitted on the affiliation form _____

Adviser's Signature

Date

CTE Director's Signature
or individual completing the
state department report

Date

Remember to submit the online application at www.fcclainc.org by April 1 to receive national recognition.

This form must be received by Michigan FCCLA No Later Than December 1, to receive the benefits of 100% membership.

Michigan FCCLA
Eastern Michigan University
Ypsilanti, MI 48197
FAX (734) 487-4329