

SHINING STAR NOMINATION FORM

Directions: Complete and submit this form by March 8th to Jill Hanson Roe
320 East 11th Street, Blue Earth, MN 56013
Fax 507-526-7571 or E-mail to state@mnccla-hero.org

Name of Nominee: _____

Home Phone Number: _____ Name of Parent/Guardian: _____

Nominating Advisor: _____ School Phone Number: _____

Advisor E-mail Address: _____ School/Center: _____

For each of the following, please list three things the nominee has achieved or done well:

Classroom Accomplishments:

1) _____

2) _____

3) _____

Work/Internship Accomplishments:

1) _____

2) _____

3) _____

FCCLA-HERO Participation and Accomplishments:

1) _____

2) _____

3) _____

Other School Related Activities/Accomplishments:

1) _____

2) _____

3) _____

Non-school Related Activities/Accomplishments:

1) _____

2) _____

3) _____

Personal Characteristics Deserving of Recognition:

1) _____

2) _____

3) _____

Please E-mail state@mnccla-hero.org a short, 3 to 4 sentence summary about the candidate.