

**Junior Leader Personnel Profile**  
**NYS Family, Career and Community Leaders of America**

District # \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Parent (s): \_\_\_\_\_

Membership in FCCLA(circle grades)    5   6        7        8

Present Year in School \_\_\_\_\_

School: \_\_\_\_\_ Phone  
#: \_\_\_\_\_

Address: \_\_\_\_\_

Advisor Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

I recognize that this nomination requires the Junior Leader to attend the 2021 Summer Leadership, 2022 Fall Planning meeting, and the 2022 State Meeting. I agree to support this nomination.

Chapter Adviser Signature: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Administrator Signature: \_\_\_\_\_

As a Junior Leader, I promise to abide by the FCCLA code of conduct, uphold the purposes of the organization, and follow through on my commitment to complete assignments and attend required meetings.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Please return the form to Lisa Thomas, 17 Mohawk Drive, Lisle, NY 13797 by 6/1/21.**