NAFCE HEART OF FCE

Due Date: **See Below**
Each state to submit **ONE** nominee

State send to: _____ (nafce chair)
_____
_____

Nomination Name: _____

Address: _____

Phone: _____

Club: _____
Please attach recent photograph of nominee (original photo, no scanned copies please)

Briefly describe reason for recommendation for the **Heart of FCE Award.** Please include individual effort, any project and results, and other contributions made by nominee while working in FCE. For publicity purposes, **limit the summary to 100 words or less.**

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Name of person submitting: _____

Office/Title of Person: _____

Address: _____

Phone: _____

State President's signature: _____ *(2005)*

County Due Date: _____	Region Due Date: Sept. 15th to Region President	State Due Date: February 15th to State President