



NATIONAL FCE PROGRAM REPORT FORM
For reporting purposes only, not for judging for National Award

FCE PROGRAM _____

ONLY FCE PROGRAMS WILL BE COUNTED

Summary of work done in: Year _____ State _____

State President's Signature: _____

Due Date: Postmarked by April 15th of the following year.

Send one COPY to: Vice President for Program, Vice President for Public Policy and President for reporting purposes only, not for awards consideration.

Name of person submitting _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email: _____

National FCE Programs Presented:

Add columns and lines as needed to complete this form. The following information is needed for EACH FCE Program

Table with 5 columns: # of FCE Presenters, FCE Hours Volunteered, # of FCE Members Reached, FCE \$ Spent, # Non-FCE People Reached. Includes 3 empty rows for data entry.

Describe the objective, action, and evaluations of each of the FCE programs presented:

What were the RESULTS of your program? What were the benefits to your community?