



20 ____ HEART OF FCE AWARD

STATE _____

Due Date: Postmarked by April 15
Each state may submit **ONE** nominee.
Send one copy to: National FCE Headquarters
73 Cavalier Blvd., Suite 106
Florence, KY 41042-5178

Nominee Name: _____

Address: _____

Phone: _____

Club: _____

Please attach recent head photograph (2x2) of nominee (original photo requested)

Briefly describe the reason for recommending this person for the HEART OF FCE Award. Please include individual effort, and project(s) and results, or other contributions made by nominee while working in FCE. Mention the ways they have given their time, talents, and energy sharing skills learned in FCE to make a difference not only in FCE, but in other areas as well. Be specific. For publicity purposes, **LIMIT THE SUMMARY TO 100 WORDS OR LESS.**

Name of person submitting: _____

Office/Title of Person: _____

Address: _____

Phone: _____

State President's signature: _____