STAR EVENTS PROJECT SUMMARY

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This Project Summary Form is to be completed by the STAR Events participant(s) for each chapter entry. This should be completed at or near the completion of the project, but prior to the first competition. One survey per entry (team or individual) is required. Members may update survey data as needed. Don't forget to hit submit and to check your email account for confirmation. The email confirmation will be sent to the email associated with the student's account. If a replacement email is needed, please contact competitiveevents@fcclainc.org.

STAR Event participants should complete the following Project Summary Form and include the proof of submission in the competition display, file folder, or portfolio. This form will take approximately 15-20 minutes to complete. Project information may be used by FCCLA in communication with potential partners, FCCLA publications, and general use by FCCLA national headquarters. Personal information will not be included. If you have any questions or concerns, please contact national headquarters by emailing competitiveevents@fcclainc.org.

1. In which event are you competing?: *Required Select
2. If you chose "State Competitive Events" for the previous question, please enter the name of your state event.
3. How many members are competing on this team?: *Required
Which chapter members are competing in this event? (Select your name, and any additional members for team events. To select multiple members, use the CTRL key. If using a Mac computer, use both the CTRL and the COMMAND keys.)
Please select your competition category: *Required

What is the title of your project? (Do NOT enter the title of your event, e.g., Food Innovations.) Please provide a brief overview of your project (one paragraph.): *Required Was your project part of one of the national FCCLA Programs?: *Required If you answered yes to the previous question, which national program did you Select... use? Approximately how many people have you reached through this project (please include those involved in research, presentations, and any public relations efforts)? ENTER NUMBERS ONLY. For example, type "100" not "one hundred." Do not type any additional text.: *Required How did this project positively impact your family, school, or community?: *Required

During this school year, are you or any member of your team enrolled in at least one Family and Consumer Sciences course?: *Require d		
	ticipation in FCCLA has helped me learn or improve the following skills (check all that ly): *Required	
Γ	Awareness of Community or World	
Γ	Communication/Observation/Writing Skills	
Γ	Conflict Resolution/Respect	
Γ	Creativity	
Γ	Decision Making or Problem Solving	
Γ	Leadership	
Γ	Professionalism/Integrity	
Γ	Public Speaking	
Γ	Responsibility and Time Management	
Γ	Self Confidence	
Γ	Specific Career Related Skills	
Γ	STEM Skills (Science, Technology, Engineering or Math)	
Г	Teamwork	
Г	Technology	
	Working with Adults	

Why did you choose to compete in this STAR Event? (Check all that apply): *Required

Γ.	Adviser encouraged me		
Γ	Applies to future goal		
Γ	Friends encouraged me		
Γ	Like the challenge of competing		
Γ	Part of classwork or assignment		
Γ	Response to a specific personal, school, or community need		
Γ	Senior project, service, or graduation requirement		
Γ	Thought it would be interesting/fun/educational		
Γ	To increase leadership skills		
	te how useful your STAR Events experience will be in your ure.: *Required		
Are you planning on pursuing higher education and/or a career related to this event?: *Required			
Are you interested in any of the following FACS Career Pathways? (Choose as many as apply.) *Required			
Γ			
	Chef/Baking Specialist		
Γ			
	Chef/Baking Specialist		
	Chef/Baking Specialist Customer Service Representative		
	Chef/Baking Specialist Customer Service Representative Early Childhood Center Director		
	Chef/Baking Specialist Customer Service Representative Early Childhood Center Director Event Planner/Manager		
	Chef/Baking Specialist Customer Service Representative Early Childhood Center Director Event Planner/Manager FACS Educator		
	Chef/Baking Specialist Customer Service Representative Early Childhood Center Director Event Planner/Manager FACS Educator Family/Marriage Counselor		

Γ	Food Service Manager
Γ	Interior Designer
Γ	Nutritional Educator/Dietitian
Γ	Personal Financial Advisor
Γ	Preschool Teacher
Γ	Restaurant Manager
Γ	Room Stager
Γ	Social Worker
Γ	Textile Chemist
Na and ser htt	Other FACS Major/Career ase indicate the most applicable Family and Consumer Sciences tional Standard used in your event. Please use the standard number d name, e.g. "7.1 Analyze career paths within family and human vices." A list of the national standards can be found here - p://www.nasafacs.org/national-standards-and- mpetencies.html : *Required

To save your work, please click on "SAVE" so that you can return later to complete it. When you are ready to submit your survey, please click on "SUBMIT" and a confirmation email will be sent to the email associated with the student's account, with a copy also sent to the chapter adviser. Please print the confirmation email for use in your STAR Events documentation. Only one copy per entry (team or individual) is needed.

Submit Save