

**California Association FHA-HERO
GOLDEN STATE DEGREE PROGRAM
CHAPTER DEGREE APPLICATION
Due: March 1**

The statements which follow represent the minimum qualifications for achievement of the Chapter Degree. The candidate, chapter advisor, chapter president, and school principal must be able to verify information and each required person must sign on page 4 of this application.

PART I – ELIGIBILITY

Name of Candidate	FHA-HERO Chapter
Home Address	School
City/Zip Code	FHA-HERO Region
Home Telephone	Year in School
<p>Circle One: MALE FEMALE</p> <p style="text-align: center;">_____</p>	
	School Year

CANDIDATE <i>(check and date when completed)</i>		ADVISOR <i>(initial when completed)</i>	
YES	DATE	YES	DATE
_____	_____	_____	_____
	<p>1. Currently enrolled in a Home Economics Careers and Technology class at or above the eighth grade level. <i>(verification - transcript or class list)</i></p>		
_____	_____	_____	_____
	<p>2. Memorized and recited the official FHA-HERO Opening and Closing Ceremony.</p>		
_____	_____	_____	_____
	<p>3. Memorized and recited the official FHA-HERO Creed, Motto, and Goal.</p>		
_____	_____	_____	_____
	<p>4. Described and explained the meaning of the official FHA-HERO colors.</p>		
_____	_____	_____	_____
	<p>5. Described the official FHA-HERO emblem and how it should be worn.</p>		

CANDIDATE

(check and date when completed)

ADVISOR

(initial when completed)

YES DATE

6. Demonstrated a knowledge of FHA-HERO official dress and guidelines for conduct. *(Explain the official dress and guidelines for conduct:)*

YES DATE

7. Demonstrated a knowledge of the history of the organization. *(Write a brief history of FHA-HERO nationally and in California:)*

8. Demonstrated a knowledge of the Chapter Bylaws and Program of Activities. *(Describe the Chapter By-laws and Program of Activities in writing:)*

CANDIDATE

(check and date when completed)

ADVISOR

(initial when completed)

YES DATE

YES DATE

_____ _____ **9. Has completed at least 5 hours of community service in the current school year.** _____ _____

Describe Community Service Performed _____ *Date(s)* _____ *Hours* _____

_____ _____ **10. Has access to a FHA-HERO Members Handbook:** _____ _____
Date when handbook was received _____
(Has read/reviewed the handbook)

_____ _____ **11. Submitted a written application to the local chapter for the degree** (Application should include a list of chapter activities, participation/attendance during the current program year) _____ _____

_____ _____ **12. Has an overall scholastic standing of 2.5 or higher.** _____ _____
(verification: transcript)

PART II – CERTIFICATION

I certify that all the above information is correct and accurate.

Date Signature of applicant (required)

I certify that all the above information is accurate.

Date Signature of local Chapter Advisor (required)

Date Signature of local Chapter President (required)

I certify that the application has a current overall scholastic record of 2.5 or higher on an A=4.0 scale.

Date Signature of School Principal (required)

PART III – REGION RECORDS

One copy of the Chapter Degree application with the required verification has been sent to the
FHA-HERO Regional Advisor's office:

- | | YES | DATE |
|--|-------|-------|
| 1. Verification of dues received: Dues have been paid for the current year for the member applying. The name of the member appears on the chapter's membership roster. | _____ | _____ |
| 2. The applicant applied for and received the chapter degree during the _____ school year | _____ | _____ |

Signature of FHA-HERO Region Advisor

Date