



Discovery FFA Degree Application

As you complete each of the following requirements for the Discovery FFA Degree, place a check in the box and write the date on the line to the right.

NAME: _____ Date Submitted: _____

CHAPTER: _____ Due Date: _____

Requirement for Degree

Date Completed

- I am, have been or will be enrolled in an agricultural class during some portion of my 7th or 8th grade year.

List class name: _____

- I have paid my local, state and national dues or I am enrolled in an affiliated agricultural education program.

Date paid: _____

- I have participated in at least one FFA chapter activity outside of scheduled class time.

List activity: _____

- I have knowledge of agriculture-related career, ownership and entrepreneurial opportunities.

- I am familiar with the local FFA chapter Program of Activities.

- I will print and submit this application to my local advisor or will submit electronically.

Having met these requirements, I hereby submit this application for the Discovery FFA Degree.

Member's Signature:

Date:

FOR CHAPTER USE

I/We have reviewed this application and certify that the candidate has met the requirements and will be awarded the Discovery FFA Degree.

Chapter President or Chapter Membership Committee Chairperson

Date:

Chapter Advisor

Date: