

PLEASE PRINT CLEARLY
ALL INFORMATION MUST BE INCLUDED

Please Return Immediately to:
Cheryl Zimmerman
Wisconsin FFA Center
P.O. Box 110
Spencer, WI 54479

Wisconsin Association of FFA FFA Creed Speaking LDE Report District Leadership Development Events

District Number _____ Host Chapter _____

Date of Event _____

LIST ALL PARTICIPANTS AND PRINT CLEARLY *Indicate the placing of at least the top 5. Preference is to have all participants placed so they know how they did in competition and if members cannot participate in the Sectional Competition.

Placing*	Name	Chapter

Judges' Signatures: _____

Reported by:

Host Advisor Signature:	Chapter:
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Please Return Immediately to:
Cheryl Zimmerman
Wisconsin FFA Center
P.O. Box 110
Spencer, WI 54479

Wisconsin Association of FFA
Prepared Public Speaking LDE Report
District Leadership Development Events

District Number _____

Host Chapter _____

Date of Event _____

LIST ALL PARTICIPANTS AND PRINT CLEARLY *Indicate the placing of at least the top 5. Preference is to have all participants placed so they know how they did in competition and if members cannot participate in the Sectional Competition.

Placing*	Name	Chapter	Title of Speech

Judges' Signatures: _____

Reported by:

Host Advisor Signature	Chapter
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Please Return Immediately to:
Cheryl Zimmerman
Wisconsin FFA Center
P.O. Box 110
Spencer, WI 54479

Wisconsin Association of FFA
Extemporaneous Speaking Event Report
District Leadership Development Events

District Number _____

Host Chapter _____

Date of Event _____

LIST ALL PARTICIPANTS AND PRINT CLEARLY *Indicate the placing of at least the top 5. Preference is to have all participants placed so they know how they did in competition and if members cannot participate in the Sectional Competition.

Placing*	Name	Chapter	Subject

Judges' Signatures: _____

Reported by:

Host Advisor Signature:	Chapter:
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Please Return Immediately to:
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Wisconsin FFA Center
P.O. Box 110
Spencer, WI 54479

Wisconsin Association of FFA Parliamentary Procedure Event Report District Leadership Development Events

District Number _____

Host Chapter _____

Date of Event _____

PARTICIPANTS— LIST ALL TEAMS AND PRINT CLEARLY

Place All Teams Participating and Rank Gold, Silver or Bronze

Place	Chapter	Number on Team	Gold	Silver	Bronze

Judges' Signatures: _____

Reported by:

Host Advisor Signature:	Chapter:
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Wisconsin FFA Center
P.O. Box 110
Spencer, WI 54479

Wisconsin Association of FFA

FFA Discussion Meet Event Report

District Leadership Development Events

District Number _____

Host Chapter _____

Date of Event _____

LIST ALL PARTICIPANTS AND PRINT CLEARLY *Indicate the placing of at least the top 4 in the final round. Preference is to have all participants placed so they know how they did in competition and if members cannot participate in the Sectional Competition.

Place*	Name	Chapter

Judges' Signatures: _____

Reported by:

Host Advisor Signature	Chapter
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Please Return Immediately After Event To:
Cheryl Zimmerman
Wisconsin FFA Center
P.O. Box 110
Spencer, WI 54479

Wisconsin Association of FFA Quiz Bowl LDE Report District Leadership Development Events

District Number _____

Host Chapter _____

Date of Event _____

Participating School

Placing

(Top two teams will advance to sectional competition)

Certified By Event Judges

Reported by:

Host Advisor Signature:	Chapter:
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Please Return Immediately to:
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Wisconsin FFA Center
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Spencer, WI 54479

Wisconsin Association of FFA
Employability Skills LDE Report
District Leadership Development Events

District Number _____

Host Chapter _____

Date of Event _____

LIST ALL PARTICIPANTS AND PRINT CLEARLY *Indicate the placing of at least the top 5
Preference is to have all participants placed so they know how they did in competition and if
members cannot participate in the Sectional Competition.

Placing*	Name	Chapter

Judges: _____

Reported by:

Host Advisor Signature:	Chapter:
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