

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**  
Section Leadership Development Events

Section Number \_\_\_\_\_

Host Chapter \_\_\_\_\_

Date of Contest \_\_\_\_\_

**LIST ALL PARTICIPANTS AND PRINT CLEARLY** \*Indicate the placing of all six competitors if there are six. No ties. Preference is to have all participants placed so they know how they did in competition and if members cannot participate in the State 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 Event Report**  
Section Leadership Development Events

Section Number \_\_\_\_\_

Host Chapter \_\_\_\_\_

Date of Contest \_\_\_\_\_

**LIST ALL PARTICIPANTS AND PRINT CLEARLY** \*Indicate the placing of all six competitors if there are six. No ties. Preference is to have all participants placed so they know how they did in competition and if members cannot participate in the State Competition.

Placing*	Name	Chapter	Title of Speech

Judges' Signatures: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reported by:

Host Advisor Signature	Chapter
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Wisconsin FFA Center  
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Spencer, WI 54479

# Wisconsin Association of FFA

## Extemporaneous Public Speaking LDE Report

### Section Leadership Development Events

Section Number \_\_\_\_\_

Host Chapter \_\_\_\_\_

Date of Contest \_\_\_\_\_

**LIST ALL PARTICIPANTS AND PRINT CLEARLY** \*Indicate the placing of all six competitors if there are six. No ties. Preference is to have all participants placed so they know how they did in competition and if members cannot participate in the State Competition.

Placing*	Name	Chapter	Subject

Judges' Signatures: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reported by: 

Host Advisor
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Chapter:
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Signature:	
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Spencer, WI 54479

# Wisconsin Association of FFA

## Parliamentary Procedure LDE Report

### Section Leadership Development Events

Section Number \_\_\_\_\_

Host Chapter \_\_\_\_\_

Date of Contest \_\_\_\_\_

**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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Cheryl Zimmerman  
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Spencer, WI 54479

# Wisconsin Association of FFA

## FFA Discussion Meet LDE Report

### Section Leadership Development Events

Section Number \_\_\_\_\_

Host Chapter \_\_\_\_\_

Date of Contest \_\_\_\_\_

**LIST ALL PARTICIPANTS AND PRINT CLEARLY** \*Indicate the placing of all six competitors if there are six. No ties. Preference is to have all participants placed so they know how they did in competition and if members cannot participate in the State Competition.

Place*	Name	Chapter

Judges' Signatures: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reported by: 

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

# Wisconsin Association of FFA

## Quiz Bowl LDE Report

### Section Leadership Development Events

Section Number \_\_\_\_\_

Host Chapter \_\_\_\_\_

Date of Contest \_\_\_\_\_

**Participating School**

**Placing**

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(Top teams will advance to State competition)

Certified By Contest Judges

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Reported by:

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

Wisconsin Association of FFA  
**Employability Skills LDE Report**  
Section Leadership Development Events

Section Number \_\_\_\_\_

Host Chapter \_\_\_\_\_

Date of Contest \_\_\_\_\_

**LIST ALL PARTICIPANTS AND PRINT CLEARLY** \*Indicate the placing of all six competitors if there are six. No ties. Preference is to have all participants placed so they know how they did in competition and if members cannot participate in the State Competition.

Placing*	Name	Chapter

Judges: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reported by: 

Host Advisor Signature:	Chapter:
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