FFA Degree Application
Rock County FFA Chapter

_____

name of candidate

FFA Degree Application
Rock County FFA Chapter

Year In School:_____

1. How many semesters of ag ed classes have you completed? _____
2. Are you familiar with the Program of Activities of the Rock County FFA? Yes No
3. What does SAE stand for?

4. List at least one chapter activity you have participated in:
   a)

   b)

   c)

5. What does being an FFA member mean to you?

6. List at least five skills or knowledge you have gained from ag class, FFA, and SAE.
   a. .
   b. .
   c. .
   d. .
   e. .

Signature of **candidate**:_____ Signature of **president**:_____

Signature of **secretary**:_____ Signature of **advisor**:_____