



North Carolina Extension Association of Family & Consumer Sciences

The Professional Association of North Carolina Cooperative Extension Family and Consumer Educators

ADA B. DALLA-POZZA PROFESSIONAL DEVELOPMENT ENDOWMENT

APPLICATION FORM

NOTE: Application should be typed, double-spaced, up to three pages in length, with all pages numbered consecutively.

SUBMIT APPLICATION TO: Dr. Joe Zublena and copy to current NCEAFCS Vice-President for Awards and Recognition

PLEASE PRINT OR TYPE

Personal Information:

Name _____ Position _____

Social Security Number _____

Office Address _____ County _____

City _____ State _____ Zip _____

Office Telephone _____ Home Telephone _____

Years of NCEAFCS membership _____ Years of NEAFCS membership _____

Date: _____ Signature _____

Applicant

I have reviewed this application and supplemental information and certify to it and the application or plan.

Date: _____ Signature _____

Immediate Supervisor

On separate page(s) include the following:

1. Overview of Extension Accomplishments (within the past three years)
2. Involvement in NCEAFCS and other professional associations
3. Future Plans for Professional Development
4. Professional development experience planned for use of this award

Application deadline is December 15