



# 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