



NAME(S): _____
 CHAPTER: _____
 ID: FOR MICHIGAN DECA USE _____ SECTION: FOR MICHIGAN DECA USE _____

CHAPTER AWARD PROGRAM CAP

PROGRESS REPORT FORM - PAGE 1

DOCUMENTATION IS ATTACHED FOR THE: *Only one completed Progress Report Form needs to be submitted.*

(CHECK ONE) **GOLD LEVEL** **SILVER LEVEL** **BRONZE LEVEL**

FOR GOLD LEVEL PROJECTS:

- Chapter must have also completed any six (6) membership development activities: **YES** **NO**
- Chapter must have achieved at least one (1) of the qualifications below during **this school year** to be eligible to receive the Gold Level Award:

100% Membership:	YES	NO
“Gimmie 5!” Membership Award:	YES	NO

MEMBERSHIP DEVELOPMENT

ACTIVITY TITLE	ACTIVITY DATE	PAGE NUMBER

COMMUNITY ORIENTED

ACTIVITY TITLE	ACTIVITY DATE	PAGE NUMBER

EXPERIENCED LEADERS

ACTIVITY TITLE	ACTIVITY DATE	PAGE NUMBER



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PROGRESS REPORT FORM - PAGE 2

ACADEMICALLY PREPARED

ACTIVITY TITLE	ACTIVITY DATE	PAGE NUMBER

PROFESSIONALLY RESPONSIBLE

ACTIVITY TITLE	ACTIVITY DATE	PAGE NUMBER

PROMOTION / PUBLIC RELATIONS

ACTIVITY TITLE	ACTIVITY DATE	PAGE NUMBER

REMEMBER:

- Two activities are needed in each area for the Bronze Level Award.
- Four activities are needed in each area for the Silver Level Award.
- Six activities are needed in each area for the Gold Level Award.