



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

CHAPTER AWARD PROGRAM MICAP

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.