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:

1. Chapter must have also completed any six (6) membership development activities: ☐ YES ☐ NO
2. 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

   "8 more for the 80th" 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

NAME(S): _____

CHAPTER: _____

ID: FOR MICHIGAN DECA USE SECTION: FOR MICHIGAN DECA USE

CHAPTER AWARD PROGRAM MICAP

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.