



LOCAL RECRUITMENT OF CHAPTERS FORM

This event is designed to honor those local chapters that charter or reactivate chapters of FBLA, FBLA-Middle Level, and/or PBL. Complete all of the information requested below. A local chapter must recruit a minimum of two (2) new/ reactivating chapters to qualify. Mail this entry to your state adviser/chair for approval. The state chairperson must forward the entry to the national center **to be received by the second Friday in May.**

Please type or print clearly.

School Name: _____ Chapter Number: _____

Check one: FBLA PBL FBLA-Middle Level

Lead Adviser: _____ Chapter President: _____

Lead Adviser's E-mail: _____

School Address: _____

City: _____ State: _____ Zip: _____

List chapters (minimum of two [2]) chartered and/or reactivated, giving chapter number, name of school, city, state, and zip code.

Chapter Number	Name of School Chartered or Reactivated	City	State	Zip	Date Chapter Installed or Reactivated	Activities Completed to Charter or Reactivate

Number of chapters chartered this year by your chapter: _____

Number of chapters reactivated this year by your chapter: _____

Signed _____
Chapter President or Adviser

Date

Signed _____
State Chair or State Adviser

Date