

# 2023-2024 STAR EVENTS ONLINE PROJECT SUMMARY FORM



This Project Summary Form is to be completed by the STAR Events participant(s) for each chapter entry. This should be completed at or near the completion of the project, but prior to the first competition. One survey per entry (not per person) is required. Members may update survey data as needed. Don't forget to hit submit and to check your email account for confirmation. The email confirmation will be sent to the email associated with the student's account and to the chapter adviser. If a replacement email is needed, please contact [competitiveevents@fcclainc.org](mailto:competitiveevents@fcclainc.org).

STAR Event participants should complete the following Project Summary Form and include the proof of submission in the competition display, file folder, or portfolio. This form will take approximately 15-20 minutes to complete. Project information may be used by FCCLA in communication with potential partners, FCCLA publications, and general use by FCCLA national headquarters. Personal information will not be included. If you have any questions or concerns, please contact national headquarters by emailing [competitiveevents@fcclainc.org](mailto:competitiveevents@fcclainc.org).

### Important:

The Project Summary form must be filled out on the student portal, and it cannot be completed through the adviser portal. Participants must log in using their username (membership ID, not email) and password. If a student is uncertain about their password, the adviser can reset it by selecting the "Update Student Password" black button on the member's tab. After completing the form, they will receive a confirmation email for their project. In case they do not receive the email, the adviser can obtain a copy of the confirmation in the adviser portal by going to [Surveys Applications > Competitive Events > Show Student Survey Applications > Locate and download the student's submission PDF](#).

In which event are you competing? \*Required:

Digital Stories for Change

If you chose "State Competitive Events" for the previous question, please enter the name of your state event.

How many members are competing on this team? \*Required

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Which chapter members are competing in this event? Select your name, and any additional members for team events. To select multiple members, use the CTRL key. If using a Mac

computer, use both the CTRL and the COMMAND keys.

Madison Bivens  
Sydney Edmonds  
Hannah Jackson

Please select your competition level: \*Required

Level 3 (grades 11 and 12)

What is the title of your project? (Do NOT enter the title of your event, e.g., Food Innovations.) \*Required

Check Your Food to Feed your Mood!

Please provide a brief overview of your project (one paragraph): \*Required

Through the digital stories of change, we will show how

Was your project part of one of the national FCCLA Programs? \*Required

No

If you answered "yes" to the previous question, which national program did you use?

Approximately how many people have you reached through this project? Please include those involved in research, presentations, and any public relations efforts. Enter NUMBERS only. Type "100" not "one hundred" and do not include any additional text. \*Required

How did this project positively impact your family, school, or community? \*Required

During this school year, are you or any member of your team enrolled in at least one Family and Consumer Sciences course? \*Required

Participation in FCCLA has helped me learn or improve the following skills (check all that apply): \*Required

- Awareness of Community or World
- Communication/Observation/Writing Skills
- Conflict Resolution/Respect
- Creativity
- Decision Making or Problem Solving
- Leadership
- Professionalism/Integrity
- Public Speaking
- Responsibility and Time Management
- Self Confidence
- Specific Career Related Skills
- STEM Skills
- Teamwork
- Technology
- Working with Adults

Why did you choose to compete in this STAR Event? (Check all that apply): \*Required

- Adviser encouraged me
- Applies to future goal
- Friends encouraged me
- Like the challenge of competing
- Part of classwork or assignment
- Response to a specific need
- Senior project/Service requirement/Graduation requirement
- Thought it would be interesting/fun/educational
- To increase leadership skills

Rate how useful your STAR Events experience will be to your future: \*Required

Are you planning on pursuing higher education and/or a career related to this event? \*Required

What career pathway or area are you most interested in? \*Required

Please indicate the most applicable Family and Consumer Sciences National Standard used in your event. Please use the standard number and name, e.g., "7.1 Analyze career paths within family and human services." A list of the national standards can be found here - <http://www.leadfcsed.org/national-standards.html> :

Please include data in all required fields. When you are ready to submit your survey, please click on "SUBMIT," and a confirmation email will be sent to the email associated with the student's account, with a copy also sent to the chapter adviser. Please print the confirmation email for use in your STAR Events documentation. Only one copy per entry (team or individual) is needed.