

TO: **All Illinois FBLA Advisers**  
 FROM: Sandra Bronson, Illinois FBLA State Adviser  
 DATE: February 1, 2020  
 SUBJECT: **Each Chapter Must Return an ISBE Certification Form Even If the Chapter Does Not Attend the 2020 State Leadership Conference**

Reimbursement from the Illinois State Board of Education

Illinois FBLA receives between \$10,000 and \$16,000 each year from the Illinois State Board of Education for operation expenses of the Illinois Future Business Leaders of America. However, Illinois FBLA only receives this money if the FBLA Chapter Advisers send the Certification Form to the Financial Coordinator. **If an FBLA chapter does not attend the 2020 State Leadership Conference, the chapter must still return the ISBE Reimbursement Form on or before February 15, 2020.**

All students who have been submitted to the national office as members of the chapter must be listed on the ISBE Certification Form, even if the members are not taking a career and technical education reimbursed business course. The same spelling of each member's name should be used on this form as has been submitted to the national office. The Ethnicity, Gender, and Special Populations sections must be completed. Please check with your Guidance Department or the Administration for assistance on this information. In order to receive the reimbursement funds from ISBE, the **FBLA Adviser and the Principal** of the high school must certify that the information on the form is complete and correct so both must **SIGN** the form. Complete either the form attached to this memo or the Excel form.

**“At the October 3, 1992, Illinois FBLA Board of Directors meeting, it was adopted that Illinois FBLA members cannot attend the State Leadership Conference or compete in the competitive events unless the Illinois State Board of Education Certification Form is sent with the State Chairman’s State Leadership Conference Registration Form.”**

Therefore, in order to attend the Illinois FBLA State Leadership Conference and compete in competitive events, please make sure that the Illinois State Board of Education Certification Form for FBLA is mailed to the state chairman along with the state leadership conference registration summary form, hotel summary form, and candidate’s forms. All should be postmarked on or before February 15, 2020.

**Mail to: Mrs. Kelly Wilkerson, Illinois FBLA Financial Coordinator, 4146 Kenwood Avenue, Gurnee, IL 60031**

Please complete the Illinois State Board of Education Certification Form for FBLA as follows:

<u>Name of FBLA Member--list ALL members, even if not in a business course in <b>alphabetic order by LAST NAME.</b> Use same spelling as submitted to the <b>national office.</b> List first name first, then middle if any, then last name.</u>	<u>Year</u> in <u>School</u> 9,10,11,12	List all Illinois State Board of Education Career and Technical Education Reimbursed <b>BUSINESS</b> courses enrolled in during 2019-2020
John Abbott	11	Accounting I
Katherine Jones	12	Accounting II, Business Law
Mary Smith	10	-- (Put a line or two hyphens or leave blank if student is not enrolled in a reimbursed <u>business</u> course)

**Reminder: All the information on the form must be completed, and the FBLA adviser and the school's principal must SIGN the form before sending it to Darlene Shannon.**

NAME OF HIGH SCHOOL \_\_\_\_\_ Date \_\_\_\_\_

**ILLINOIS STATE BOARD OF EDUCATION CERTIFICATION FORM FOR FBLA—Due February 15, 2020**

Name of FBLA Member--list **ALL** members, even if not in a business course, in **alphabetic order by LAST NAME**. Use same spelling as submitted to **national office**. List first name first, then middle if any, and then last name.

Year  
In  
School  
9,10,11,12

List all Illinois State Board of Education Career and Technical Education Reimbursed **BUSINESS** courses enrolled in during **2019-2020**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_
14. \_\_\_\_\_
15. \_\_\_\_\_
16. \_\_\_\_\_
17. \_\_\_\_\_
18. \_\_\_\_\_
19. \_\_\_\_\_
20. \_\_\_\_\_
21. \_\_\_\_\_
22. \_\_\_\_\_
23. \_\_\_\_\_
24. \_\_\_\_\_
25. \_\_\_\_\_

**ETHNICITY:** May need to check with Administration/Guidance Department. Put number of members who are

African American \_\_\_\_\_ Hispanic \_\_\_\_\_ Asian \_\_\_\_\_ American Indian \_\_\_\_\_  
American Caucasian \_\_\_\_\_ Other \_\_\_\_\_ Total Members \_\_\_\_\_

**GENDER:** How many members are Female \_\_\_\_\_ Male \_\_\_\_\_ Total Members \_\_\_\_\_

**SPECIAL POPULATIONS:** *Please check with your Guidance Department or Administration.* How many members are Economically Disadvantaged \_\_\_\_\_ Educationally Disadvantaged \_\_\_\_\_ Physically Disadvantaged \_\_\_\_\_ Learning Disabled \_\_\_\_\_ Limited English Proficient \_\_\_\_\_ Program to Eliminate Sex Bias \_\_\_\_\_  
Did you check the Special Populations information with the Administration/Guidance Department? \_\_\_\_\_ (Yes or No)

School District Name \_\_\_\_\_ District No. \_\_\_\_\_

WRITTEN Signature of School's Principal \_\_\_\_\_

WRITTEN Signature of Local FBLA Chapter Adviser \_\_\_\_\_