



# Omaha Fashion Week Student Night Application

Student Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Student Email Address: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Chapter Name: \_\_\_\_\_ Adviser Name: \_\_\_\_\_

School Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Adviser Email Address: \_\_\_\_\_

Chapter Adviser Cell Phone: \_\_\_\_\_

Describe why you are interested in participating in Omaha Fashion Week Student Night.

Describe your design and the creative process to completion.

Describe your design and fashion construction experience.

I have read the guidelines and understand if selected the requirements of this event. I verify this is an original design completed utilizing my own skill set. I understand that this event has no impact on award or recognition as part of the Nebraska FCCLA STAR Event competition and that guidelines for each event should be followed.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Parent Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
FCCLA Adviser Signature

\_\_\_\_\_  
FCCLA Adviser Name

\_\_\_\_\_  
Date

This application, a scan of the croquis, and applicable pictures must be submitted to the State Adviser at [chelsey.greene@nebraska.gov](mailto:chelsey.greene@nebraska.gov) by Wednesday, December 15 at 4:00pm CDT.  
*Late applications or materials will not be accepted.*