



**THE BLOOD
CONNECTION**

Your Community Blood Center

NORTH CAROLINA HOSA **ENTRY FORM**

The Blood Connection is a non-profit
independently managed community blood center.

Our mission is to ensure a safe and
uninterrupted blood supply to patients in need.

**The Blood Connection is committed
to serving our local communities.**



THE BLOOD CONNECTION

North Carolina HOSA Participation and Recognition

Eligibility and Judging Criteria

There are 4 competitive event awards and certificates of participation for chapters sponsoring a blood drive.

Point System for Life Saving Project

1. Eligibility

HOSA chapter must have sponsored at least one blood drive during the competitive year.

2. Point System

- A. **30pts.** For each blood drive sponsored by the chapter during competitive year.
- B. **20pts.** If the goal for the number of donors to present is met or exceeded.
- C. **30pts.** If the chapter wins the highest number of donors at a single drive (one and two day drive).
- D. **30pts.** If the chapter wins the highest number of pints donated at a single drive (may be a one or two day drive).
- E. **30pts.** If the chapter wins the highest number of donors to present for the competitive year (all sponsored blood drives combined)

Blood Drive Competition Awards

- 1. Chapter sponsoring high school blood drive with the highest number of donors to present at a single drive (one-day drive).
- 2. Chapter sponsoring high school that has the highest number of pints donated at a single drive (may be a one or two day drive).
- 3. Chapter sponsoring high school that has the highest number of donors to present for the competitive year (all sponsored blood drives combined).
- 4. All Chapters who sponsor 3 or more blood drives during the competitive year, will receive a plaque from, and be recognized by, Rex Blood Services and be listed in the NC HOSA State Conference guide.

Please submit the Entry Form to:

NC-HOSA

via **upload link on the website**

<http://nchosa.org/conferences/state-leadership-conference/>



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Participation and Recognition Competition Entry Form

Chapter Name _____

Advisor _____

School Address _____

Phone # _____

District _____ Email _____

Life Saving High School Blood Drives

Date of Blood Drive	Blood Drive Goal	Number of Students Registered	Number of Pints Collected

Thank you for being part of the connection and giving life to your community.

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