District / State Officer Qualification Form

OFFICERS' QUALIFICATION FORM FOR DISTRICT AND STATE ELECTIONS All information <u>must be TYPED and kept to this one page format.</u>

EMAILTO <u>DISTRICT ADVISER</u> BY MIDNIGHT on JANUARY 10 or set date STATE OFFICER CANDIDATES EMAIL TO: <u>plamb@ksde.org</u> by FEBRUARY 12

Officer Candidate for District:	Chapter: _	GPA:	
Name:	· ·	Graduation Date:	
		references. (include district & if running for state	
Candidate Letter (office use	only)		
Candidate Letter (office us			-
grade or above prior to assuming have completed two courses of Fa	responsibilitie amily and Cor	init of Family and Consumer Sciences at 6th es. State or National Officer Candidates must nsumer Sciences courses at 6th grade or above ourses, course length, and year taken.	€
	201 4		_
responsibilities. Number of years		er for <u>one year</u> prior to assuming official	
responsibilities. Number of years t	as an i ooli (
		activities completed in each category that would	l
help you in serving as an FCCLA FCCLA CHAPTER	officer. Exam	ple: Basketball; Student Council Officer HOME	
1.		1.	
2.		2.	
DISTRICT FCCLA		SCHOOL	
1.		1.	
2.		2.	
STATE FCCLA		COMMUNITY	
1.		1.	
2.		2.	
Check Power of One modules cor	nnleted		
A Better You		Take the Lead Family Ties	
Speak Out for FCCLA		Working on Working	
T "	E001 A (()	50	
include previous FCCLA offices.	n FCCLA offi	icer in 50 words or less. Please do not directly	
I am also seeking the position of N	Iational Offic	er Candidate. Yes No	
i am also seeking the position of N	ianonal Offic	ci Candidate 1 cs NO	

District Officer Candidate Contract

KANSAS FAMILY, CAREER AND COMMUNITY LEADERS OF AMERICA RECEIVED BY THE DISTRICT ADVISER & DISTRICT PRESIDENT BY _____

As a district and/or state officer candidate of the F	Family, Career and Community Leaders of America I,
	of
(Name of candidate)	, of (Name of chapter)
If elected I will: 1. Attend and participate in all activities of my loc the state association or state advisor.	cal chapter, all district meetings, and all meetings designated for my office by
2. Adhere to the code of conduct rules for officer sent home immediately at his/her own expens	work and travel. Violation of conduct rules may result in the delegate being se.
Complete my officer responsibilities on time or receive approval and extension by the appropriate appropriate in the control of the cont	r will notify the appropriate adviser as to the reason for delay. Officer must riate adviser.
4. Required attendance at National Leadership C President. District President is required to also at	onference and Take AIM Conference, if elected as State Officer or District tend the District President Training in April.
5. Maintain privacy by keeping personal address,	home phone numbers, and personal email confidential.
6. Remain in good standing with the school, whic	h includes expulsion or probation.
Failure to meet any of the above requirements machine Certificate".	ay result in immediate removal from office or loss of the "Honor Officer
Signed	Candidate Date:
Our daughter/son_elected, we shall cooperate in every way to assist	has our permission to become an FCCLA officer candidate. If her/him to attend the above meetings and to fulfill their officer responsibilities.
Signed	Parent/Guardian Date:
Address_	Home Phone:
As a chapter adviser, I believe the candidate has assigned duties and attend meetings with them a	the qualifications for the office she/he is seeking. If elected, I will assist in all s requested.
Signed	Adviser Date:
The school administration gives approval for the	above officer candidate and if elected, we pledge our support.
Signed	Administrator Date:

Code of Conduct

KANSAS FAMILY, CAREER, & COMMUNITY LEADERS OF AMERICA DISTRICT OFFICER CODE OF CONDUCT

All meetings and activities of the Kansas FCCLA are educational functions and plans are made with that objective in mind. Your behavior at these meetings and activities is a direct reflection on yourself, your local chapter, school, home, district and the state association.

The Kansas Association wants every person to have an enjoyable experience with maximum attention to safety and comfort. Everyone is expected to conduct him/herself in a manner best representing our organization both at meetings and in daily life. In order that everyone may receive maximum benefits from their participation, the following policies are mandatory and nonnegotiable. These policies will be enforced for every student attending a district, state and/or national FCCLA activity of the Kansas Association.

I will not:

- 1. Possess or consume the following, which includes but is not limited to: tobacco, cigarettes, vape, or e-cigarettes, nicotine products, alcohol or any other illegal drugs.
- 2. Use the internet/social media in any way that will degrade myself, others or Kansas FCCLA. (Sign the attached social media document.)
- 3. Use vulgar language or make demeaning remarks to any student or adult.
- 4. Wear inappropriate clothing to FCCLA meetings, which include jeans, flip-flops, hats or any other item of clothing that advisers feel is demeaning to the organization as a whole.
- 5. Leave meeting without permission of adviser.
- 6. Charge any expenses to my room including food, telephone, pay TV, etc.
- 7. Break any established curfews.
- 8. Discriminate against any person due to age, race, gender, religion or sexuality.
- 9. Be found to have committed a felony by court of law or adjudicated for a felony including probation.

I will:

- 1. Attend all sessions in their entirety for which I am registered.
- 2. Behave professionally at all times: be courteous to all guests and delegates (students and adults), respect property of others (private and public), use proper manners, and refrain from unnecessary physical contact.
- 3. Follow established curfews.
- 4. Meet students of the opposite sex only in public meeting areas. Sleeping rooms are off limits without the presence of assigned adult.
- 5. Wear appropriate clothing, which for FCCLA events are NO jeans.
- 6. Maintain the volume of audio devices (i.e. Cell phones, I-pods, etc.) at a reasonable level (the State Association is not responsible for theft).
- 7. Properly secure valuables (recommend using safe in hotels) and use caution in displaying these items. The State Association will not be responsible for theft or damage.
- 8. Review schedules or agendas with advisor & keep them informed of my whereabouts at all times.
- 9. Attend all required meetings and communicate with the chapter adviser and district advisers regarding attendance.

If any of the above statements are violated and needed to be reviewed, the **DISTRICT OFFICER ADVISORY BOARD** consisting of the District President, District Vice President and the District Advisor will resolve district officer conduct issues as they arise. All decisions of this board will be final.

RULES OF MY SPECIFIC SCHOOL DISTRICT WILL ALSO APPLY WHEN ATTENDING AN FCCLA ACTIVITY.

I understand that should I violate any of the above policies I may be dismissed from the meeting/conference and may not be allowed to attend any future functions of the Kansas FCCLA and may have to reimburse the District or State Association for all expenses relating to this event.

Date	Participant's Signature
	I understand the conduct policies. We also agree that the district/state staff has the righter home from the activity at our expense, provided s/he violated the conduct policies
	has become a detriment to the activity or image of the District/State Association.



KANSAS FCCLA

Social Media Code of Conduct

I,	, agree to	follow all the guidelines of Family, Career and Community
Leade	ers of America (FCCLA) with regard to s	ocial media use. This includes, but is not limited to,
Faceb	ook, Twitter, Pinterest, Vine, Tumblr, an	nd Instagram. As an elected officer of Kansas FCCLA, I
agree	to the following:	
	participating in any illegal activity or of I will not say anything derogatory towards.	ards a specific religious or political group that reveal inappropriate public displays of affection (PDA)
In add	lition, officers will abide by the following	g guidelines:
J J J	FCCLA officer. This will include: O Using proper grammar on sociation Maintaining a positive and profocular Wearing appropriate clothing in I will promote FCCLA and build excite whenever it is asked of me I will support the other officers on social will keep the other officers accountable messaging and in connection with an agreetain post, I will respect that opinion I will always be respectful on social messaging and in social mess	ressional image a a modest manner ement for members through my social media pages al media with regard to FCCLA and personal activities ble for their actions on social media by use of private ppropriate advisor. When others ask for removal of a and take down the post.
	a consequence that fits the transgression.	
	-	
Signat	ture of Member:	Date:
Signat	ture of Local Advisor:	Date:
Signat	ture of Parent:	Date:
Disclo	ose Social Media User Names Facebook	
Instag	ram	
Snapc	hat	Other
1		

PERSONAL PROFILE FOR DISTRICT / STATE OFFICER CANDIDATE

(Confidential: NOT to be seen by applicant) Please fill out this	form and email to		t	y Ja	nuar	y 10
Candidate's Name	District Officer U	Jse _				
Chapter	_ State Officer Us	se				
KEY FOR CHECKING: Superior-5 Excellent-4 Good-3 Fair-2 Poor-1			ı			T
	Mark X in the appropriate column	1	2	3	4	5
Character						
Acceptable personal appearance (well-groomed)				igwdown		
2. Shows interest in position		ļ				
3. Acceptable personal behavior						
4. Personal traits: consider- honesty, trustworthiness, effort, sense of hability to accept criticism	umor, enthusiasm, attitude,					
Scholarship						
1. Class work (family and consumer sciences & others)						
2. Ability to carry out instructions						
3. Effort in terms of ability						
Leadership						
1. Ability to express self and explain clearly facts & ideas to others						
2. Punctuality; including meeting deadlines						
3. Organization ability (possesses skills to serve as state officer)						
4. Assumes responsibility						
5. Works well with others, is a team player						
6. Ability to use time well						
Services						
1. Chapter (knowledge of organization, participation in activities, interest	st)					
2. Home (family members &student are willing to co-operate in working of time, money, & home responsibilities	out needed transportation, use					
3. School (participates in worthwhile activities in proportion to the whole obligations, and personal energies & time)	e school program, home					
4. Community (other youth organizations)						
Citizenship						
Attendance to class (not tardy or absent unnecessarily)						
2. Respectful and responsible for others and personal belongings						
Do you feel that this student is ready to assume the responsibilities of being an FCCLA District Officer?	Total F	Point	s:			
Yes No tl	Do you feel that this student is ready to assume the responsibilities and obligations of being an FCCLA State Officer? (only check if member is					
Signed r	unning for State Officer)					

Two Personal Profile Sheets are to be completed, one by the candidate's chapter adviser and the other by an adult school staff member familiar with the candidate's qualifications. When the chapter adviser is the parent of the applicant, the Profile Sheets should by another

Yes___ No___

Position or Title _____

Name/Photo/Video/Audio Release

Project Description: Family, Career and Community Leaders of America Web Site Calendar	and
Use: Information	
I,, in consideration of using my name, photo	graph,
videotape, or otherwise recording me, hereby grant to Kansas Family, Career and	
Community Leaders of America the irrevocable right and license to use my name, a	ınd/or
likeness on the Kansas Family, Career and Community Leaders of America Web Si	ite
and/or Kansas Family, Career and Community Leaders of America Publications.	
I agree to hold Kansas Family, Career and Community Leaders of America harmles	SS
against any liability, loss or damage resulting from the use of my name, image and/o	or
voice, and hereby release and discharge Kansas Family, Career and Community Lea	aders
of America from any and all claims whatsoever in connection with such use of my	name,
image and/or voice.	
Please fill out the bottom portion of this form completely.	
Student's Name:	
Please Print Address:	
City/State/Zip:	
Telephone:	
Student's Signature: Date:	
Parent/Guardian Signature: Date:	
Tarong Gaardian Dignature Date	