**Nebraska Association of Family, Career**

**and Community Leaders of America**

**State Officer Candidate Application**

In accordance with current policy, candidates for State Offices must complete this application. She/he must have shown leadership responsibilities at the chapter level or above when nominated and must be a freshman, sophomore, or junior. Prior to service as a State Officer, candidates shall have completed the equivalent of one semester of Family and Consumer Sciences (FACS) or related occupational classes.

Each chapter may run a candidate for State Office at District Leadership Conference, based on the previous year’s affiliated membership, as follows:

1-20 members=1 candidate 41-60 members=3 candidates

21-40 members=2 candidates 61 or more =4 candidates

By completing this application, each State Officer Candidate acknowledges the following:

* I am currently an active member in good standing, in an affiliated chapter
* I am a freshman, sophomore, or junior when nominated for office.
* Prior to service as an elected officer, I have completed the equivalent of one semester of Family and Consumer Sciences classes.
* I agree to attend the State Officer Selection event as well as the State Leadership Conference pending Level 1 advancement
* I am not a present or former member of the FCCLA State Officer Team.
* I have shown leadership ability in responsibilities at the chapter level or above.
* I am not running for a state officer position in another Career and Technical Student Organization (CTSO).

**Directions:**

* Save this form to your computer before beginning to fill it out. Close out of this form and open the one you saved. If you type on this form as it is, it will not save anything you type.
* Complete all pages of this form. Use only the space provided and do not manipulate the form in any way. You need to put the most important items in the space provided.
* Have 2 Personal Profile sheets (page 6) filled out for you and placed in a sealed envelope, as you are not to see these. One should be completed 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 Sheet should be completed by another adult school staff member.
* Complete the Code of Conduct form with appropriate required signatures.
* Mail the completed pages of this application and sealed profile sheets to the State Adviser by January 15.
* Candidates are required to send a digital head and shoulder photo of themselves to Terri Behl at terri.behl@nebraska.gov . (Note: Do not use a school photo as these are protected with a copyright.)

Present a speech, up to three minutes in length, without visuals on the following topic:

“National FCCLA’s 2019-2020 theme, Your Story, Our Story, is a celebration of the 75th anniversary of FCCLA. How can FCCLA look to the past to create our future story?

**Nebraska FCCLA**

**State Officer Candidate Application**

|  |
| --- |
| Personal Information |
| Name |  | Grade |  |
| Home Address |  | City |  | Zip |  |
| Email Address |  | Phone # |  |
| Chapter Information |
| Chapter Adviser Name |  | Email |  |
| District Adviser Name |  | Email |  |
| School Name |  |
| School Address |  | City |  | Zip |  |
| School Phone # |  | District & Region |  |
| Personal Qualifications |
| The grade level students could first be an FCCLA member at my school |  |
| The grade levels in which I have been/are a member of FCCLA |  |
| List FCS courses and grade level when taken. Please list the courses as they appear on your transcript. |  |

Why do you want to become a member of the Nebraska FCCLA State Officer Team?

|  |
| --- |
|  |

Briefly explain one of the most valuable experiences you have had in FCCLA.

|  |
| --- |
|  |

List your participation in FCCLA, school, and community activities in the space provided. Include offices held, programs, and competitions, workshops and contributions to the Family and Consumer Sciences program. Note that not every space may be filled.

|  |  |  |  |
| --- | --- | --- | --- |
|  | FCCLA/FCS Activities | Non-FCCLA Activities | Community Activities |
| Local |  |  |  |
| District/Regional |  |  |  |
| State |  |  |  |
| National |  |  |  |

Using the information from the previous chart, explain your leadership qualities and experiences and tell how they would help you be an FCCLA State Officer.

|  |
| --- |
|   |

If elected to a State office, I am interested in running for election for the following specific office(s). Please specify which of the offices you would like to hold by indicating a 1-7, with a 1 being your first choice. Candidates should reference the State Officer Handbook for specific office descriptions and responsibilities. Officer positions will be determined at a later date.

 President/Vice President

If this choice is selected, the person with the highest score shall be named President and the person with the next highest score will be named Vice President

 Secretary

 Vice President of Development

 Vice President of Public Relations

 Vice President of Membership

 Vice President of Competitive Events

 Vice President of Programs

**State Officer Candidate Brochure and**

**State Leadership Conference Information**

In 100 words or less, write a brief description of yourself and your FCCLA experiences. This text will NOT be edited when it is put online for the membership to read so be sure to check spelling and grammar. Also, count your words to be sure you are under the 100-word limit. Once you hit that limit, your description will be stopped.

|  |
| --- |
|  |

Candidate Signature Adviser Signature

**Website Photo Release**

I agree to permit my photograph to be displayed on the Nebraska FCCLA website.

I further agree that I, my heirs, and my legal representatives release and hold FCCLA, its officers, directors, members, employees, or agents, harmless from any injury, claims, unauthorized use, misuse, actions, judgments, or other liability that may result from the display of my photograph on the FCCLA website.

Please include a head and shoulders photo to be used in the form of a digital image. Do not use a photo that is copyright protected, such as a school photo.

Candidate Signature Date

Parent/Guardian Signature Date

 **State STAR Events Information**

Yes No

If yes, then please indicate which event you *may* be participating in at this year’s State Leadership Conference:

|  |
| --- |
|  |

**Nebraska FCCLA**

**State Officer Candidate Contract**

**State Officer Candidate**

By signing below, I acknowledge the following statements:

* I will attend all official State Officer Team meetings, required State events and I understand that my failure to do so may result in removal or resignation from office.
* I will attend the National Leadership Conference in July (unless absolutely not financially feasible).
* I have read and meet all of the qualifications for State Officer.
* If elected, I agree that it is my responsibility to perform to the best of my ability and to place this obligation above other school co-curricular and extra-curricular activities, keeping in mind that I must maintain a satisfactory scholastic average. In the event that I graduate prior to completing my term of office, I understand that I will have to relinquish my position in accordance with the State FCCLA Bylaws.

Candidates Signature Date

**Parent/Guardian**

This student is applying to be a Nebraska FCCLA State Officer. It is an honor and a great responsibility for a student to be a State Officer. Being a State officer will require your support financially, emotionally, physically, and in general, total parental backing.

Our daughter/son has our permission to become an FCCLA State Officer Candidate. If elected, we shall cooperate in every way to assist her/him to attend the above meetings and to fulfill their officer responsibilities.

Parent/Guardian Signature Date

**Adviser**

As a chapter adviser, I believe the candidate as the qualifications for the office she/he is seeking. If elected, I will assist in all assigned duties and attend all meetings as requested.

Adviser Signature Date

**School Administrator**

The school administration gives approval for the above State Officer Candidate and, if elected, we pledge our support.

Administrator Signature Date

**Nebraska FCCLA**

**Personal Profile for State Officer Candidate**

 ***(Confidential: NOT to be seen by applicant and all information given will be kept confidential)***

|  |  |
| --- | --- |
| **CANDIDATE NAME: -****CHARACTER** 1. Acceptable personal appearance (well-groomed) | Mark X in appropriate column below |
| 5(superior) | 4(excellent) | 3(good) | 2(fair) | 1(poor) |
|  |  |  |  |  |
|  2. Shows interest in position |  |  |  |  |  |
|  3. Acceptable personal behavior |  |  |  |  |  |
|  4. Personal traits: consider--honesty, trustworthiness, effort, sense of humor, enthusiasm, attitude, ability to accept criticism |  |  |  |  |  |
| **SCHOLARSHIP** 1. Class work (family and consumer sciences and others)  |  |  |  |  |  |
|  2. Ability to carry out instructions |  |  |  |  |  |
|  3. Effort in terms of ability |  |  |  |  |  |
| **LEADERSHIP** 1. Ability to express self and explain clearly facts and 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) |  |  |  |  |  |
|  2. Home (family members and student are willing to co-operate in working out needed transportation, use of time, money, and home responsibilities) |  |  |  |  |  |
|  3. School (participates in worthwhile activities in proportion to the whole school program, home obligations, and personal energies and time) |  |  |  |  |  |
|  4. Community (other youth organizations) |  |  |  |  |  |

Overall, do you truly feel that this student is ready to assume the responsibilities and obligations of being an FCCLA State Officer?

 Yes No

Signed Name Printed Name

Position or Title Date

**NEBRASKA FAMILY, CAREER AND COMMUNITY LEADERS OF AMERICA**

 **STATE OFFICER CANIDATE CODE OF CONDUCT/PROCEDURES CODE**

The Nebraska Career and Technical Student Organizations of Nebraska require each state officer candidate to read and complete this form and return to the state office as partial completion of their state officer application process.

 1. Appropriate dress of businesslike attire will be expected. Official dress or uniform will be worn at all state approved activities, meetings, or conferences.

 2. There shall be no defacing of property. Any damages to any property or furnishing in hotel rooms, meeting rooms, or conference locations must be paid by the individual responsible and may subject the individual to criminal prosecution.

 3. State officers shall keep their state adviser informed of their official activities and whereabouts at all times.

 4. State officers shall be prompt and prepared for all official activities.

 5. State officers must be in their sleeping rooms and quiet at curfew. Curfew will be established by the state adviser.

 6. No alcoholic beverages or narcotics in any form shall be possessed at any time, under any circumstances, while representing the local school and career and technical student organization. Possession of such substances may subject the individual to criminal prosecution.

 7. No use of tobacco products (including e-cigarettes and/or vaping) in public will be permitted while a delegate is representing his/her local school and career and technical student organization.

 8. State officers are required to attend all assigned activities such as workshops, competitive events, committee meetings, delegate assemblies, state officer meetings, etc. If a state officer cannot fulfill an assignment, the state adviser must be notified immediately.

 9. Identification badges will be worn at all times while serving in official capacity as a state officer.

 10. Male and female officers may not be in the same sleeping room unless the door is open or an adviser/sponsor is present in the room.

 11. Conduct not conducive to an educational conference will not be allowed. Such conduct includes actions disrupting a businesslike atmosphere, association with non-conference individuals or activities which endanger self/others.

 12. State officers are directly responsible to the state adviser. A state officer may also work closely with his/her chapter adviser in activities and assignments.

 13. All official correspondence as a state officer should be typed correctly using proper letter style. A copy of all official correspondence as a state officer must be sent to the state adviser. All correspondence mailed by the state officer shall be proofread.

 14. The state adviser will use his/her discretion in calling on a state officer (past or present) to represent the organization.

 15. Education always takes precedence. State officers must plan accordingly so that problems do not occur.

 16. Official travel by a Nebraska state officer must have approval from the state adviser and may require chapter adviser and parent/guardian approval.

 17. When expenses are paid by the state organization, reimbursement will be made directly to the state officer after submission of an expense reimbursement sheet.

 18. An up-to-date itinerary must be prepared and left with parents, local advisers and the state office staff.

 19. A travel authorization form may be required before any travel.

 20. Candidates for state office must demonstrate appropriate social media use on all platforms.

PROCEDURES

 1. The state officer shall be responsible to the state adviser while serving in the capacity of a state officer.

 2. Officers violating the conduct code will be dealt with by the state adviser in cooperation with the local adviser and local school administration and the policy making body for the career and technical student organization. The officers may be sent home at their own expense and/or removed from office.

"I have read and fully understand the Nebraska FCCLA State Officer Conduct/Procedures Code and agree to comply with these conduct guidelines. Furthermore, I am aware of the consequences that will result from violation of any of the above guidelines."

 Date State Officer Candidate Signature

We approve the student named above to attend state approved Nebraska FCCLA activities. We agree to the provisions as stipulated in the Conduct/Procedures Code.

 Parent/Guardian's Signature Chapter Adviser's Signature

Work Phone Home/Cell Phone Work Phone Home/Cell Phone

Auto Insurance Company Name/Policy Number