

South Dakota Association Family, Career and Community Leaders of America State Leadership Team Application Instructions

Please complete State Leadership Team Application following instructions below. **Submit two hard copies** of completed application - <u>one to State FCCLA Adviser & one to Leadership Team Adviser</u> postmarked on or before April 1.

- State Leadership Team Application Information Sheet
- FCCLA Resume
 - Attach a professional FCCLA resume, one page only in length, typed in 11 point Times New Roman font with margins set at .75 all around, providing the below criteria:
 - Name, home address, phone number, and email address.
 - School, chapter, year in school, number of years in FCCLA, total years of FACS instruction, team applying for membership.
 - List all Family and Consumer Sciences courses and grade levels when taken. Please list the course titles as they appear on your transcript.
 - List your participation in FCCLA at the local, district/region, state and national level.
 - List offices held in FCCLA.
 - List your participation in your school and community organizations.
- Affiliation
 - Attach a copy of chapter affiliation form, verifying candidate's membership.
- Photography & Website Consent and Release Form
 - Parents must sign the Photography Consent and Release Form located on page 5.
- Candidate Support Form
 - Candidate, chapter adviser, school administrator, and parent or guardian must read and sign the Candidate Support Form on page 6.
- Make a copy of your application for your records before you submit it to state adviser and team adviser.

Application postmark deadline: April 1st.

Submit:

- 1. Mail hard copy completed application to Kris Brockhoft, State Adviser, and submit \$5 application fee via SD FCCLA State Leadership Conference registration. If registration fee is not submitted via SLC registration, mail with application.
- 2. Second hard copy of application to Adviser of Leadership Team applying to:

SD FCCLA State Adviser Kris Brockhoft	CURRENT TRENDS TEAM Karen Mettler	NATIONAL OUTREACH TEAM Megan Zinter	ADVOCACY TEAM Anne Pankratz
103 Wenona Hall	Eureka High School/FCCLA	Bowdle High School/FCCLA	Marion High School/FCCLA
Box 507, SDSU	PO Box 10	P.O. Box 563	P.O. Box 207
Brookings, SD 57007	Eureka, SD 57437	Bowdle, SD 57428	Marion, SD 57043



SOUTH DAKOTA FCCLA STATE LEADERSHIP TEAM APPLICATION INFORMATION SHEET

NAME	GRADE				
CIRCLE TEAM APPLYING FOR:	NATIONAL OUTREACH	TRENDS	ADVOCACY		
CHAPTER	SCHOOL				
ADVISER	ADVISER CEL	L PHONE			
SCHOOL ADDRESS					
CANDIDATE HOME ADDRESS					
HOME/PERSONAL E-MAIL					
SCHOOL E-MAIL					
HOME PHONE	CELL PHONE				
FOOD ALLERGIES					
PARENTS					
NAMES					
ADDRESS					
E-MAIL	PHO	NE			
SCHOOL					
PHONE					
PRINCIPAL					
SUPERINTENDENT					
Please use this candidate information sheet as the cover sheet for leadership team application.					

Team Purpose:

- **Trends Team** Focus on a national program decided upon by the team members.
- National Outreach Team Focus on outreach goals set by national and state executive councils.

Organization of Teams:

- Each team may consist of up to 10 members.
- Students are eligible to be on each team one year.
- All members through grade 11 are eligible to apply.
- Trends Team will determine national program to focus on annually based on available programs.
- Outreach Team will focus on the national Outreach Program for that particular year.
- Two candidates are allowed to apply per chapter.
- No more than two students can represent a chapter on a team.

Team Responsibilities:

- Term of position is State Leadership Conference to State Leadership Conference.
- Members are required to participate in Fall Training and Winter Training.
- Uniforms will be the expense of the members and will comply with state/national dress code.
- Nametags are to be worn at all official FCCLA events and replacement costs are up to the member.
- Team members will offer workshops as requested during term.
- Write a minimum of three newspaper articles for submission to local paper.
- Present a workshop at region meeting and state meeting.
- Submit monthly reports to coordinator.
- Compile a portfolio throughout the year to be used during exit interview.
- Act professionally at all FCCLA functions local level to national level.
- Failure to meet the responsibilities as stated will result in probation. The second offense will be removal from the State Leadership Team. Failure to attend and participate in Fall Training or Winter Training will result in immediate removal from the team.

Selection:

- Members interested in applying for a state leadership team will need to submit 2 completed applications by April 1, one to the SD State FCCLA Adviser and one to the Leadership Team adviser of team applying to.
- An FCCLA knowledge test will be taken by candidates at the state meeting.
- Candidates will be interviewed by a team comprised of current members, alumni and advisers. No more than six people will serve on the interview committee.
- During the interview, candidates will give a 2-3 minute presentation with a brochure or infographic about a current trend or outreach project they would like to focus on in the upcoming school year. The brochure is the only prop or visual allowed. No other visuals, handouts or costumes will be allowed.
- Selection will be based on 50% interview score, 25% application score, and 25% test score.

Team Purpose:

Advocacy Team – Enhance the state association through marketing efforts, sponsorships, and alumni.

Organization of Team:

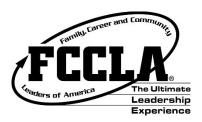
- Team may consist of up to 10 members.
- Former state officers, former national officers, and national officer candidates are eligible for the Advocacy Team and is a current FCCLA member.
- Members may be on this team more than one year.

Team Responsibilities:

- Term of position is State Leadership Conference to State Leadership Conference.
- Members are required to participate in Fall Training and Winter Training.
- Uniforms will be the expense of the members and will comply with state and national dress code.
- Nametags are to be worn at all official FCCLA events and replacement costs are up to the member.
- Team members will offer workshops as requested during term.
- Write newsletter for alumni and facilitate alumni reception at state meeting.
- Members will contact a minimum of five community groups.
- Members will have a minimum of ten sponsor contacts.
- Submit monthly reports to coordinator.
- Compile a portfolio throughout the year to be used during exit interview.
- Act professionally at all FCCLA functions local level to national level.
- Failure to meet the responsibilities as stated will result in probation. The second offense will be removal from the State Leadership Team. Failure to attend and participate in Fall Training or Winter Training will result in immediate removal from the team.

Selection:

- Eligible members interested in applying for a State Leadership Team will need to submit a completed application by April 1st.
- Candidates will be interviewed by a team comprised of current members, alumni and advisers. No
 more than six people will serve on the interview committee.
- The interview will be a mock sponsorship meeting in which the candidate will present information as they would to a potential sponsor.



Photography & Website Consent and Release Agreement

I, ______, hereby give SD Family, Career and Community Leaders of America the absolute right and permission to photograph me. I hereby grant to SD Family, Career and Community Leaders of America all rights to reproduce and disseminate such photographs and images, in whole or in part, or altered in character or form, that will be used by the SD Family, Career and Community Leaders of America in conjunction with presentations, programs, publications, and the SD FCCLA website.

I further grant SD Family, Career and Community Leaders of America all rights to make further reproductions of such pictures and images through any media, for educational purposes, art, entertainment, advertising of, and internal use for other lawful purposes. I also grant to SD Family, Career and Community Leaders of America the right to copyright such pictures and images in its own name or to publish, to market, and to assign without compensation or report to me.

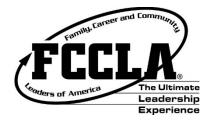
I hereby waive the rights or interests that I may have in the pictures or images, including my rights to inspect and/or approve the finished photographs and images or the use of which it may be applied so long as its use shall be lawful.

I expressly release SD Family, Career and Community Leaders of America, their agents, employees, licensees and assigns from and against any and all claims which I have or may have for invasion of privacy, defamation or any other case of action arising out of the production, distribution, publication, and exhibition of the photographs and images.

Parent/Guardian Signature _		Date
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Candidate Signature _____

Date _____



Candidate Support Form ADMINISTRATOR SUPPORT: I verify this student is academically eligible for participation as a peer educator/Stat Team. I understand and support the student attending Fall Training (October 6-7, 2024); a (January 8, 2025); and the State Leadership Conference in April 27-29, 2025. I recommend this student for a peer education/State Leadership Team position. Signature: Date: Verify the student applying for this state leadership position is an active FCCLA me and is capable of fulfilling the responsibility of this position. I accept the responsibility to support the student attending Fall Training (October 6-7, 2024); a (January 8, 2025); and the State Leadership Dosition is an active FCCLA me and is capable of fulfilling the responsibility of this position. I accept the responsibility to support the student by providing resource informatior individual and team projects and activities. I understand and support the State Leadership Conference in April 27-29, 2025. Signature: Date: PARENT/GUARDIAN COMMITMENT: I understand and support the student attending Fall Training (October 6-7, 2024); a (January 8, 2025); and the State Leadership Conference in April 27-29, 2025. Signature: Date: Signature: Date: Signature: Date:	dership Team Applicatio
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