

# SOUTH DAKOTA OFFICER CANDIDATE APPLICATION COVER PAGE

NAME	CURRENT GRADE			
CHAPTER	SCHOOL			
ADVISER	ADVISER CELL PHONE			
SCHOOL ADDRESS				
CANDIDATE SCHOOL E-MAIL				
CANDIDATE HOME/PERSONAL E-MAIL				
CANDIDATE HOME PHONE	CELL PHONE			
FOOD ALLERGIES				
PARENT/GUARDIAN CONTACT INFOR	MATION			
NAMES				
PHONE: HOME	CELL			
SCHOOL				
PHONE				
PRINCIPAL				
SUPERINTENDENT				
Please use this candidate information sheet as the	e cover for officer applications at all levels.			



### South Dakota Association Family, Career and Community Leaders of America Region/State Officer Candidate Application Instructions

Congratulations! You have taken the first step toward becoming an FCCLA Region and/or State Officer. Serving as a region or state officer offers countless opportunities to grow your leadership skills, exciting challenges, and lifelong friendships.

SD FCCLA Policy and Procedure Manual-Part II SD FCCLA ORGANIZATION, page 3, Section II: State Executive Council, B-Qualifications of State Officers, #2 states: Must have a minimum of one semester of family and consumer sciences; #5 states: Candidates for Region President shall be a freshman, sophomore, or junior rank in high school. Review the information in this officer application packet carefully. Be sure you are ready to accept the responsibilities of the office before you commit to running. Holding an FCCLA region and/or state office is a time, travel, and financial commitment. Officers who are unable to meet the commitments of their position will be required to forfeit their office.

All applicants must be current, affiliated FCCLA members. Please complete the following instructions for the Region/State Officer Candidate Application. Applications need to be postmarked/emailed no less than **three weeks** prior to your region meeting date.

#### ☐ 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, email address, school, school address, chapter, year in school, number of years in FCCLA, total years of FACS instruction.
  - 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, region, state and national level.
  - List offices held in FCCLA.
  - List your participation in your school and community organizations.

#### ☐ 2 Letters of Recommendation

- Provide 2 typed letters of recommendation. Each recommendation should be on a separate sheet of paper and included with the application. The recommendations must follow the below criteria:
  - A maximum of one page in length per person and double spaced.
  - One from the Chapter Adviser and the other one from a professional knowledgeable of your FCCLA and/or non-FCCLA related activities.
  - Include FCCLA leadership skills, community involvement, and academic performance.
  - Name and title of the person writing the recommendation, signed and dated.

#### □ Affiliation

O Attach a copy of the 2024–2025 chapter affiliation form, verifying candidate's membership.

#### ☐ Official Transcript

- O Attach an official transcript that indicates the candidate's cumulative grade point average.
- Candidate must have completed a minimum of one semester of Family and Consumer Sciences class.



Candidate Support Form  O Candidates must receive approval in order to run for region/state office. Candidate, chapter adviser, school administrator, and parent or guardian must read and sign the Candidate Support Form on page 3. Please have each person check all boxes, date and sign the form. If all boxes are not checked due to lack of support, we cannot accept your application.
Transcript Release Parental Agreement Form  O Parents or guardians must sign the Transcript Release Agreement Form on page 4.
Photography & Website Consent and Release Form  O Parents must sign the Photography Consent and Release Form on located page 4.
<ul> <li>Code of Conduct Agreement</li> <li>Candidate, chapter adviser, school administrator, and parent or guardian must read and sign the Code of Conduct Agreement on page 5.</li> </ul>
State Officer Preference  O Complete the State Officer Preference Form located on page 6.
State Officer Candidate Summary Sheet  O Complete the State Officer Candidate Summary Sheet located on page 7 and send only this page and a wallet-sized picture to your region's chairperson.
Make a copy of your application for your records before you submit it to state headquarters.

#### Application postmark deadline for each region:

Region I – January 8, 2025 Region III – December 26, 2024 Region V-November 14, 2024 Region IV – November 20, 2024 Region II – November 13, 2024 Region VI – December 16, 2024

Deadline - 3 weeks prior to region meeting. Mail/email completed application to (hard copy required):

SD FCCLA State Adviser 103 Wenona Hall Box 507, SDSU

Brookings, South Dakota 57007

Email scanned copy (backup if lost in mail) with signatures to <u>Kristine.Brockhoft@lakeareatech.edu</u>.

# **Candidate Support Form**

Region/State Officer Candidate Commitm	ent - If elected as a state officer, I agree to:
☐ Read and follow the SD FCCLA Code of Con	
☐ Attend the following meetings in addition to v	
	ive Council Meetings April 27-29, 2025; June 10-12, 2025; Sept. 3, 2025, January 7,
2026, and Feb. 2, 2026	une 10-12, 2025, Dakota Dreams Camps-Summer 2025, & Capitol City Experience
(Legislative Shadowing) Feb. 3-4, 2026	and 10-12, 2023, Dakota Dicams Camps-Summer 2023, & Capitol City Experience
O National FCCLA Conference July 5-9, 20.	25, Orlando, FL
O Fall Leadership Training October 5-6, 20	025
O SD State FCCLA Leadership Conference	
	your specific region meeting to serve on officer selection team
	adviser, chapter, state chapter adviser, and state adviser throughout the year.
☐ Devote the necessary time and effort to the wo	perform all assigned officer responsibilities in a timely manner.
·	•
Candidate Signature	Date
_	<b>upport -</b> If the student is elected to a state office I agree to:
☐ Support the state officer if elected.	
☐ Attend the SD State FCCLA Leadership Meeti	
	nd chaperone for the state officer to the following:
	ive Council Meetings April 27-29, 2025; June 10-12, 2025; Sept. 3, 2025, January 7,
2026, and Feb. 2, 2026 O DOE Events - CTSO Officer Training I	une 10-12, 2025, Dakota Dreams Camps-Summer 2025, & Capitol City Experience
(Legislative Shadowing) Feb. 3-4, 2026	and to 12, 2023, Bakota Breams camps summer 2023, & Capitor City Experience
O National FCCLA Conference July 5-9, 20	25, Orlando, FL
O Fall Leadership Training October 5-6, 20	
O SD State FCCLA Leadership Conference	
	your specific region meeting to serve on officer selection team
chaperone state officer when carrying out assign	orepare for his/her assigned responsibilities throughout his/her term and
	rying out Adviser Session for Fall Leadership, Sunday night adviser session at
SLC, and assist in assigned duties at State Lead	
	erve as a liaison for school officials to keep them informed.
	Date
School Administrator Support - If the stude	
	date's adviser and the state officer if he/she is elected.
	CCLA events and activities required of a state officer.
Support the adviser and the officer in his/her at	ttendance at: ive Council Meetings April 27-29, 2025; June 10-12, 2025; Sept. 3, 2025, January 7,
2026, and Feb. 2, 2026	ve Council Meetings April 27-29, 2023; June 10-12, 2023; Sept. 3, 2023, January 7,
	une 10-12, 2025, Dakota Dreams Camps-Summer 2025, & Capitol City Experience
(Legislative Shadowing) Feb. 3-4, 2026	
O National FCCLA Conference July 5-9, 20	
O Fall Leadership Training October 5-6, 20	
O SD State FCCLA Leadership Conference	your specific region meeting to serve on officer selection team
· · · · · · · · · · · · · · · · · · ·	
	TitleDate
<b>Parent Support</b> - If the student is elected to a s	state office, I agree to:
☐ Support the state officer if he she is elected.	tuoval armanaa
☐ Financially assist the student with uniform and ☐ Read and support the SD FCCLA Code of Coi	
••	Ç
Parent Signature	Date



# **Transcript Release Parental Agreement**

Region/State Officer Candidate:					
Candidates must submit a school transcript as part of their ca are agreeing to the release of the above candidate's school tra					
Parent/Guardian Signature	Date				
Printed Name					
Parent/Guardian Signature	Date				
Printed Name					
Print, Photography & Website Agreement					
I,, hereby give SD Family, Career and Community Le to photograph me. I hereby grant to SD Family, Career and Communities disseminate such photographs and images, in whole or in part, or all SD Family, Career and Community Leaders of America in conjunct materials, SD FCCLA website/social media accounts, and pre- and	inity Leaders of America all rights to reproduce and tered in character or form, that will be used by the tion with conference programs, conference				
I further grant SD Family, Career and Community Leaders of Amer pictures and images through any media, for educational purposes, a other lawful purposes. I also grant to SD Family, Career and Communication pictures and images in its own name or to publish, to market, a	rt, entertainment, advertising of, and internal use for nunity Leaders of America the right to copyright				
I hereby waive the rights or interests that I may have in the pictures approve the finished photographs and images or the use of which it					
I expressly release SD Family, Career and Community Leaders of A assigns from and against any and all claims which I have or may ha case of action arising out of the production, distribution, publication	ve for invasion of privacy, defamation or any other				
Parent/Guardian Signature	Date				
Candidate Signature					



#### Officer Code of Conduct Agreement

If serving as a State Officer, I will assume the additional duties of State Officer outlined in the Bylaws of the South Dakota Association of Family, Career and Community Leaders of America and I will fulfill the following expectations.

State Officers represent all members of the State Association and are looked to by members as an example and a leader. Applicants for Region/State Officer should consider each of the following statements carefully before signing the application, as this is a conditional privilege. We recognize that the privilege can be withdrawn by the Disciplinary Committee in their discretion, at any time.

To be considered a candidate for the office of Region/State Officer, this agreement must accompany the Region/State Officer Application. By signing this agreement, I will:

- 1. Commit to always serve the association by role modeling professional and responsible behavior. Official dress or uniform will be worn at all state approved activities, meetings, or conferences.
- 2. Conscientiously serve the Association and assist and encourage FCCLA members and chapters to take an active part in the organization, school and community.
- 3. Set an example for members of the State Association as a good student, courteous person and a responsible citizen.
- 4. Represent the State Association credibly at meetings, banquets and other gatherings when asked to do so, speaking clearly, concisely and enthusiastically, using proper grammar at all times. 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.
- 5. All official correspondence as a region/state officer should be keyed correctly using proper letter style. A copy of all official correspondence as a state officer must be emailed to the state adviser. All correspondence mailed/emailed by the state officer should be proofread by the local, state officer adviser.
- 6. Thoroughly familiarize myself with the constitution and policies of the organization, parliamentary procedure, and the total family and consumer sciences education program.
- 7. Be in respective hotel rooms by established curfew. Male and female officers may not be in the same sleeping room unless an adviser/sponsor is present in the room.
- 8. Strive to maintain a good working relationship between FCCLA and the public.
- 9. Attend all FCCLA State Executive Council assigned activities including the FCCLA National Leadership Conference. (I will be responsible for expenses which could amount to as much as \$1,500 for the National Leadership Conference. Candidate and/or chapter should be fully committed to paying the total sum when the candidate runs for office.)
- 10. Strive to improve my leadership ability and give as much time as required to carry out my duties as a Region/State Officer during the officer term. State officers shall be prompt and prepared, meeting deadlines and completing projects, for all official activities.
- 11. Make regular appointments to confer with my local chapter adviser to maintain communication regarding my officer duties, region and state-level matters. If a state officer cannot fulfill an assignment, the state adviser must be notified immediately.
- 12. In addition, I understand that any action detrimental to the FCCLA image will not be tolerated and may result in disciplinary action by the State FCCLA Disciplinary Committee up to and including dismissal from the organization.



Region V— November 14, 2024 Region VI – December 16, 2024

## **Officer Preference Form**

I,	, hereb	y place my name in nomin	ation for the following office(s). Rank the	
	of interest 1 = highest interest interest 1 = highest interest int		More information about each office can be	
found in the state co	distitution, Afficie V, Sec	tion 1-4.		
	President			
	_President			
	_First Vice-President			
Vice-President of Membership				
	_Vice-President of Public	c Relations		
	_Vice-President of Progr	ams		
	_Vice-President of Recog	gnition		
Candidate Signatur	e		Date	
Local Adviser Sign	ature		Date	
Officer Candidate	Summary Sheet Instruc	tions		
_	er Candidate Summary Sh wallet-sized photograph o		ith officer application sent to state	
sized picture/jpeg to		-	te Summary form (page 7) and a wallet- below. (Must be emailed/postmarked 3	
Region I— January	8, 2025			
Region II—Novem	ber 13, 2024			
Region III - Decem				
egion IV—November 20, 2024				



## 2025-2026 Region/State Officer Candidate Summary Sheet

Name of Candidate				Chapter _				
School E-Mail Address				Adviser's Name				
Number of Years in F	CCLA			Current Year in School				
Check all that apply: (0	Count only activities a	ittended as	an FCCLA	member)				
State Peer Education: Leadership Teams:	□Trends Team		☐ National Outreach Team☐ Teens as Teachers – Nat					
Power of One Modules:	☐ A Better You ☐ Take the Lead	☐ Family Ties ☐ Speak Out for FCCLA		☐ Working on Working				
National Fall Conferences/	Institutes Attended:	□ 2020	□ 2021	□ 2022	□ 2023	□ 2024		
Capitol Leadership Confere	ences Attended:	□ 2020	□ 2021	□ 2022	□ 2023	□ 2024		
National Leadership Confe	rences Attended:	□ 2020	□ 2021	□ 2022	□ 2023	□ 2024		
Attended:   Rookie	Γraining (Year)	[	Dower T	raining (Year	·)			
Step One Completed:	Yes (Year)		□ No					
List offices held, Competitive Events, Skill Events, or Challenge Tests you competed in, and contributions to FCCLA below.								
Local:								
Region:								
State:								
National:								
Community Involvement	nt:							

Include this page of form and photograph with state officer application and send to state office.

Send ONLY a copy of this form and a wallet-sized picture to the Region President as per instructions on page 6.