

Board of Directors Nomination Form



Position Description: The governing body of the South Dakota Family, Career and Community Leaders of America shall be the South Dakota State Board of Directors. The primary functions of the board shall be to set policy related to programs, fiscal matters and sound management. The South Dakota State Board of Directors will meet a minimum of two times each year. Please turn in completed form to Frankie Nelson at Frankie.Nelson@k12.sd.us by April 9, 2025.

Board Application Category (Check appropriate category)

Business & Industry (3-year term)

Chapter Adviser – Representing Region 5 & 6 (3-year term)

Name _____ Home Phone _____

Home Address _____

Business/School Address _____

_____ Business Phone _____

Email Address _____

Nominee Bio (Information will be presented exactly as it is typed on this form)

I _____ (name) am willing to be nominated and serve as the
_____ Representative on the South Dakota FCCLA State Board of Directors. I
will serve the position to the best of my ability for the benefit of SD FCCLA members and the State Association.

Nominee's Signature _____ Date _____

Nominated by _____ Chapter _____

Advisers Name _____ Region _____