

2022-2023

HOSA State Officer Application

Due Date: November 16th

Directions

1. Complete the application ELECTRONICALLY and upload to the Alabama HOSA link:
<https://alabamahosa.wufoo.com/forms/k10e8tqp16fv7rl/>
2. Each affiliated HOSA chapter may submit ONE officer application.
3. Candidates must currently be enrolled in 10th or 11th grade when running for office.

Please complete the following documents before visiting the website to submit:

1. Completed State Officer Application:
 - a. Application should be typed
 - b. Include all requested signatures (typed name indicates that the designated person has read all applicable information and agrees to fulfill the duties listed).
 - i. Falsification of the digital signature may result in disqualification or removal from office.
2. Digital head shot of the candidate with a neutral background (to be used in presentation on stage)
3. A copy of the chapter's current National HOSA affiliation roster (www.hosa.org)
4. A copy of proof of insurance for the state officer candidate.

Please Note: The two Officer Candidate Qualifications pages will be included in the State Leadership Conference registration packets for voting consideration. **Please do not expand them larger than the two pages.**

DO NOT ADD ANY ADDITIONAL PAGES TO THE APPLICATION

Candidate Name:

OFFICER RESPONSIBILITIES

Please rank order your preference, 1st – 4th, as a HOSA State Officer

____ PRESIDENT

- Preside over all business meetings of the organization and the State Executive Committee.
- Supervise the progress of the approved Program of Work (POW).
- Communicate regularly with the State Advisor.
- Provide monthly updates to the State Advisor regarding progress on the POW.
- Communicate regularly with the other state officers, to include communication regarding activities to promote the POW.
- Establish a professional environment for the council.
- Promote chapter leadership knowledge via regular posts to Alabama HOSA social media.
- Preside at state leadership conference.
- Be familiar with all HOSA ceremonies and parliamentary procedure.
- Sit on appointed advisory boards when asked by State Advisor.
- Represent the organization at other meetings as deemed necessary by the State Advisor.

____ 1ST VICE PRESIDENT (SECRETARY)

- Assume responsibility in the absence of the President.
- Keep the minutes of the state Executive Council meetings.
- Type and e-mail the minutes to the State Advisor within 30 days after the meeting.
- Provide a reading of the minutes, and other communications, at Executive Committee meetings.
- Communicate regularly with the State Advisor and other state officers.
- Collaborate with the other state officers to update the state officer workshops/activities and provide an outline and synopsis to the State Advisor by the conclusion of the State Officer Leadership Summit.
- Promote chapter competitive event knowledge via informational posts to Alabama HOSA social media.
- Serve in any capacity as directed by the President.

____ VICE PRESIDENT OF CHAPTER RELATIONS

- Develop/revise a welcome letter from the Executive Committee to be dispersed to new chapters.
- Develop/revise information flyers or brochures to be distributed to chapters about national and state programs, and Alabama HOSA updates.
- Provide leadership in promoting the organization's community service program and service-learning opportunities.
- Supervise the Alabama HOSA social media sites.
- Promote knowledge of HOSA's current activities via regular posts to Alabama HOSA social media.
- Communicate regularly with state officers regarding social media activity.
- Provide a report of activities at Executive Committee meetings.
- Serve in any capacity as directed by the President.

____ VICE PRESIDENT OF MEMBERSHIP

- Collaborate with the state officers to update and revise the state officer workshop/activities.
- Develop/revise a letter to the chapters offering state officer visits and detailing the content of workshop opportunities.
- Develop/revise informational flyers or brochures detailing competitive event information and helpful hints.
- Promote chapter effectiveness via regular reminders of workshops and state officer visit opportunities to Alabama HOSA social media.
- Provide leadership in planning and implementing programs for membership promotions and development.
- Provide a report of state officer visits at Executive Committee meetings.
- Serve in any capacity as directed by the President.

ALL State Officer positions are expected to visit local chapters and provide presentations and workshops that meet the needs expressed by the requesting chapter(s).

RESPONSIBILITY COMMITMENT FROM THE STATE OFFICER CANDIDATE

Read the responsibilities below associated to your role with the State Officer Candidate.

Type your name to indicate that you have read and agree to fulfill the duties associated with your role.

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IF ELECTED TO A STATE OFFICER POSITION I AGREE TO:

1. Attend the State Executive Committee Meetings and/or activities listed on the HOSA Executive Committee Required Meeting Dates document.
2. Be dedicated and committed to the Health Science Education program of Career and Technical Education and the Alabama Association of HOSA.
3. Maintain at least an over-all "C" average each grading period.
4. Conduct myself in a manner that commands respect without displaying superiority.
5. Behave in a courteous and respectful manner, refraining from language or actions that might discredit Alabama HOSA.
6. Forego all alcohol, tobacco, and illegal substances at all times during my service.
7. Avoid places and actions that could raise questions as to my moral character.
8. Resign my office if there are any changes in marital or parenthood status.
9. Follow the Alabama Executive Committee Handbook rules, guidelines, and responsibilities.
10. Cooperate with my school, advisor, chapter, and state association throughout my year of service.
11. Attend all required activities and perform all assigned officer duties.
12. Keep local and state advisors informed of all activities.
13. E-mail or contact the State Advisor on a weekly basis.
14. Devote the necessary time and effort to the work and travel requirements.
15. Resign my office if absent from any of the required state officer activities.
16. Accept the responsibility of paying for expenses not covered by Alabama HOSA.
17. Regularly and promptly write appropriate correspondence (letters, thank you notes, reports, articles, etc.).
18. Travel to and from HOSA ILC with my local HOSA Advisor.
19. Travel with my local advisor or parent to activities associated with my office.
20. Not drive my personal car, unless given written permission by my parent.
21. Not allow the opposite gender in my sleeping room at any time.
22. Uphold the HOSA image. Any action detrimental to the Professional Image will not be tolerated and may result in disciplinary action up to and including dismissal from the organization.
23. Adhere to the State Officer Code of Ethics, including the Professional Image and Dress Code Policy.

I have read and understand the Alabama HOSA State Officer Guidelines

_____ **Initial**

Digital Signature of State Officer Candidate: _____

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HOSA STATE OFFICER CANDIDATE QUALIFICATIONS

**** The two Officer Candidate Qualifications pages will be provided to voting delegates for review.**

***** Do NOT add extra pages to this section of the document. Answers must fit in the provided space.**

Candidate's Name: Click here to enter text.

Chapter Name: Click here to enter text.

Current Grade Level: Click here to enter text.

Cumulative GPA (4.0 scale): Click here to enter text.

School Name: Click here to enter text.

Years in Health Science/ PLTW Biomed: Click here to enter text. **Years as a HOSA Member:** Click here to enter text.

Number of years your school allows a student to take Health Science/ PLTW Biomed: Click here to enter text.

HOSA Projects and Meetings (Answer boxes should NOT be expanded larger than current settings)

Local HOSA Offices: List the offices you have held

HOSA Activities and Projects: List the activity and date(s)

HOSA State Leadership Conference: List the years you attended

HOSA International Leadership Conference: List the years you attended

HOSA Competitive Events: List the event(s) entered and the year

Joint Leadership Development Conference: List the years you attended

School Leadership Experiences and Honors: List by Academic School Year (i.e., 2019-2020)

Community Leadership Experiences and Honors: List by Academic School Year (i.e., 2019-2020)

Why do you want to be a HOSA State Officer?

How will you promote membership as a state officer?

Describe the qualities you believe a good leader should possess and explain why you feel this way:

Responsibility Commitment from the State Officer Advisor

IF MY STUDENT IS ELECTED TO A STATE OFFICER POSITION I AGREE TO:

1. Serve as advisor to the officer and will serve as a member of the State HOSA Executive Committee.
2. Complete all tasks assigned to me by the State Advisor, for example:
 - a. Assisting with registration at events
 - b. Registration and event preparations
 - c. Chaperoning State Officers
 - d. Presentations/Workshops
 - e. Assistance with State and National competitive events
3. Escort and supervise the state officer at all required state and national events.
4. Assist the state officer with their roles and responsibilities, which may include but are not limited to the following:
 - a. Assuring Officer duties are completed
 - b. Proofing and assisting with agendas, minutes, emails, letters, etc.
 - c. Assisting Officer with schedules and speaking engagements
 - d. Assisting Officer with planning presentations/workshops
 - e. Assisting Officer with social media communications
 - f. Securing transportation to required events
 - g. Review all speeches, workshop presentations, etc., for which state officer is responsible. Ensure he/she is prepared before meetings, workshops, or conferences, including memorization of special parts assigned.
5. Monitor officer's academic program and serve as liaison for school officials keeping school administration informed of officer activities.
6. Assist in securing funds for financial obligations not covered by Alabama Association of HOSA for any expenses incurred by the state officer.
7. Agree not to house male and female students together. Male students may not be housed with a female advisor unless they are blood relatives.
8. Communicate regularly with State HOSA Advisor regarding State Officer activities.
9. Acknowledge that the enforcement of the State Officer Code of Ethics and School Handbook is the responsibility of the local HOSA Advisor. If a violation occurs, the local advisor will call the School Administrator for direction. Parents will be contacted, and students may be sent home at their own expense.
10. Help the state officer to understand the responsibilities of the office held.
11. Provide guidance to the state officer regarding their responsibilities.
12. Discuss state officer responsibilities, activities, and expenses with local administration and parents.
13. Provide transportation for the state officer to and from required activities.
14. Ensure expenses can be paid for officer and myself until reimbursement can be processed on official Alabama HOSA forms.

I have read and understand the Alabama HOSA State Officer Guidelines

_____ **Initial**

The signature below acknowledges that I have reviewed the candidates' qualifications and I believe this application to be truthful and the applicant to be qualified for state office.

Digital Signature of State Officer Candidate Advisor: [Click here to enter text.](#)_____

**** Falsification of the digital signature may result in disqualification or removal from office.**

RESPONSIBILITY COMMITMENT OF THE SCHOOL PRINCIPAL

IF A STUDENT FROM MY SCHOOL IS ELECTED TO A STATE OFFICER POSITION I AGREE TO:

1. Support the advisor's role throughout the year and approve his/her attendance at required events.
2. Enable the officer to attend events required of a state officer.
3. Assist in securing funds for financial obligations not covered by Alabama Association of HOSA for any expenses incurred by the state officer.
4. Assure the officer's expenses can be paid until reimbursement can be processed on official HOSA forms.
5. Assign someone to serve as the local advisor for the state officer should the current advisor's employment status change.
6. Acknowledge that the advisor to the officer will serve as a member of the State HOSA Executive Committee.
7. Provide support for the local advisor as they fulfill their duties as the advisor of a state officer.
8. Provide direction to the advisor if a major infraction occurs for any violation of the HOSA State Officer Code of Ethics or the School Handbook.

Digital Signature of State Officer Candidate Principal: [Click here to enter text.](#) _____

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PARENTAL CONSENT FORM FOR HOSA EXECUTIVE COMMITTEE

Student Name _____ Date of Birth _____

Home Address _____

City _____ State _____ Zip _____

Mother's Phone Numbers

Home _____ Cell _____ Work _____

Father's Phone Numbers

Home _____ Cell _____ Work _____

If unable to reach a parent, please notify:

Name: _____ Relationship: _____

Emergency Contact's Phone Numbers

Home _____ Cell _____ Work _____

Does your child have any allergies to medication or food?

If yes, please list allergies: _____

Please provide any medical information that may be relevant to your chaperone:

Student's Physician _____

Student's Physician phone number: _____

_____ and his/her parent(s) or guardian(s) agree to release the Alabama Association HOSA, its officers, advisors, advisory council members, employees, or agents from any and all liability resulting from any occurrence during the traveling to and from the HOSA Executive Committee meetings and/or by participating as a state officer in all activities associated with the role of an Alabama HOSA State Officer.

I also give permission for my child (listed above) to receive emergency medical assistance while traveling to and from, and while attending HOSA State Officer activities/events. I acknowledge that my child has medical insurance and I have provided a copy of the insurance card to the local chapter advisor.

By typing my name below, I am stating that all the information provided is accurate and current. I also acknowledge that I have read, and agree to, the statements above.

Digital Parent Signature: _____

**** Falsification of the digital signature may result in disqualification or removal from office.**

IF MY CHILD IS ELECTED TO A STATE OFFICER POSITION I AGREE TO:

1. Provide adequate hospitalization insurance coverage, as well as any other insurance, which I deem appropriate and necessary for the officer.
2. Release, discharge, and agree to hold harmless the Alabama Association of HOSA, its agents, and employees, including, but not limited to the Health Sciences State Staff, from all claims, damages, demands, actions, judgments, and executions which the undersigned ever had or now have or may have or which the undersigned's heirs, executors, administrators, or assigns may have or claim to have against the Alabama Association of HOSA, its successors, or assigns for personal injuries, known or unknown, illness or death, and injuries to personal property caused by or arising from HOSA activities.
3. Cooperate fully to make it possible for my son/daughter to attend all state leadership team related functions.
4. Know the state officer is expected to travel to and from the HOSA International Leadership Conference with the HOSA local advisor.
5. Know that the state officer may not travel alone to designated HOSA activities without written consent from me.
6. Know that the state officer will adhere to the State Officer Code of Ethics and school Handbook while attending HOSA activities and could be sent home at parent's expense if the Code of Ethics and school Handbook are not followed.

Digital Signature of State Officer Candidate Parent: _____

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CONSENT AND RELEASE - MINOR

STUDENT'S NAME: _____

I hereby grant consent, authority, and permission to THE ALABAMA ASSOCIATION HOSA and to those acting with the authority of that organization, to use, reuse, publish, republish, the name, statements or comments, likeness, picture, photographic image, videotape or electronic image of the minor (under 19 years of age) listed above, in whole or in part, or composite or distorted, without restriction as to changes or alterations, without prior approval, in conjunction with original or reproductions in color or otherwise, in printed or electronic form, made through any medium or media, for illustration, promotion, advertising, trade, or any other purpose what-so-ever.

I understand and agree that I will not receive any compensation for the use consented here-in. I hereby release and discharge all persons acting under the consent granted above from all liability, cause of action or claim civil or criminal, by virtue of any distorted or use, intentional or otherwise, that may occur or produced in the taking or subsequent processing or publication of my name, statements, comments, or the images covered here-in.

I hereby warrant that I am of legal age and have the right to contract, consent or grant release for the minor in the above regard. I also warrant that I have read the above consent and release, prior to its execution, and that I am fully familiar with the contents thereof. This consent and release shall be binding upon me, my heirs, legal representatives, and assigns.

I hereby warrant that my digital signature below is sufficient to hold me accountable for the aforementioned consent and release. The digital signature of the witness was input after visual confirmation of my typed consent.

* If preferred, this page may be printed, scanned, and uploaded instead.

** *Falsification of the digital signature may result in disqualification or removal from office.*

Signature of Parent/Guardian/Custodian: _____

Signature of Witness: _____

Date: _____