

SkillsUSA State Officer Application Packet

- All applications need to be mailed to Irene Vogel; PhD (650 W. State Street P.O. Box 83720 Boise, ID 83720-0095; FAX 208.334.2365) to arrive by Tuesday, April 10, 2012 (late/lost applications will not be accepted).
- No Applications will be accepted at the conference, as screening starts Wednesday, April 11, 2012 with the applications.
- Two applications per chapter maximum.
- All applicants must have earned their statesman pin before conference begins.
- All officer candidates need to report to the Nampa Civic Center (room to be determined) at 8:00 a.m. on Thursday, April 12, 2012 for interviews. In full official dress.
- Candidates will be asked a series of questions in front of the panel of delegates.
- Candidates will need to come to the Friday closing and awards ceremony, in full dress uniform.

Requirements for state officer candidate:

- Has at least one full year remaining in his/her division's trade, industrial, or technical field.
- Has active member status at the school where the chapter is established and is enrolled.
- Has attended a SkillsUSA Idaho Fall Leadership Conference (FLC) and/or SkillsUSA Idaho State Leadership Skills Conference (SLSC).
- Will be available to represent the state organization at the events listed on State Officer Events and Reimbursement Schedule.
- Will respect the nomination, election, and campaign policy restrictions.
- Will, if elected, attend induction during the SkillsUSA Idaho SLSC.

Note:

- Each state officer or his/her chapter must purchase/provide the state officer with an official SkillsUSA jacket.
- Each state officer must purchase the following uniform items: Black slacks or skirt, white shirt or blouse, black shoes, and black tie. If an officer is not wearing the approved/appropriate dress, he/she will not be allowed to participate in the sanctioned event.

The following documentation, along with appropriate signatures, must be submitted in its entirety by the posted due date:

- State Officer Candidate Form, Page 1**
- Signature Page**
- State Officer Candidate Form, Page 2**
- State Officer Contract**
- State Officer Events & Reimbursement Schedule**
- State Officer Travel Permission Form**
- SkillsUSA Personal and Liability Release Form with copy of insurance card**
- SkillsUSA Idaho Statesman Award Requirements**
- Personal resume**
- Letter of support from current advisor**
- Letter of support from administrator**



State Officer Candidate Form, Page 1

Please check one College High School

First Name	Last Name
Home Address	City/Zip
Home Phone	Work Phone/Cell Phone
School Name	E-mail Address
School Address	Advisor's Name
School Phone/School Fax	City, Zip
Area of Occupational Training (i.e. Automotive)	
Year in school (High School or College) <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior Completion Date	
If you are a high school senior, which college will you attend? (If none, give the reason)	

Signature Page

Candidate's Signature	Current Advisor's Signature
<input type="checkbox"/> <i>Check here—if age 18 or older</i>	School Principal/Administrator's Signature
<i>If you are a high school senior, you must obtain the signature of your future postsecondary advisor.</i>	
Postsecondary Advisor's Signature	
Parent/Guardian's Signature	Date



State Officer Candidate Form, Page 2

First/Last Name	Nickname
<input type="checkbox"/> Single <input type="checkbox"/> Married	Date of birth
List names of individuals below who should receive copies of correspondence including both parents (if separate addresses), advisor, and school principal. List email addresses whenever possible.	
Name/Address of parent/guardian you live with	Home Phone/Work Phone Email Address
Name Position/relationship	Address/City/Zip Email Address
Name Position/relationship	Address/City/Zip Email Address
Name Position/relationship	Address/City/Zip Email Address
Employment History (job titles only)	
SkillsUSA Honors (offices held, awards received, etc.)	
Other honors (school, community, state, national)	
Membership in other organizations	
Hobbies, interests, activities	

I want to become a state officer because (complete the statement in 50 words or less)

As a state officer, I want to accomplish the following

I like my trade area because (complete the statement in 50 words or less)

After I complete my training program, I plan to get the following kind of job

Describe yourself, your accomplishments, and short/long term goals (to be used as an introduction at conferences)

The best thing about my instructor is (complete the statement in 50 words or less)

State Officer Contract

As a state officer of SkillsUSA Idaho, you have the responsibility to represent all members of the organization. Your conduct must be exemplary at all times while representing the organization and on your personal time. You will have an opportunity to meet students, advisors, administrators, and business, industry, and labor representatives during your term of office. Your actions will set a standard for all SkillsUSA members to follow. When you sign this State Officer Contract, it should be with the understanding that your obligations are great, as are the rewards of serving your fellow members. You will also be reaffirming the ideals of SkillsUSA.

As a state officer of SkillsUSA Idaho, I agree to the following rules and regulations:

- I will, at all times, respect all public and private property.
- I will spend each night in the room of the hotel/motel to which I am assigned.
- I understand that my spouse/significant other, family members, and friends will not be permitted to accompany or room with me as a state officer unless the individual is designated as a chaperone.
- I will strictly abide by the curfew established, retire to my assigned room (unless on special assignment by the state director, state advisor, or their designated representative), and I will respect the rights of others by being as quiet as possible after curfew.
- I will not be in the room of the opposite sex at any time.
- I will not consume alcoholic beverages and drugs (unless I have been ordered to take certain prescription drugs by a licensed physician, in which case I will carry the orders of the physician on my person).
- I will keep the state director, state advisor, or designated representative informed of my location at all times.
- I will not leave the hotel room to which I am assigned without the express permission of my assigned representative.
- My conduct will be exemplary at all times, during and outside of SkillsUSA functions.
- I will attend all general sessions and other activities for which I am assigned/registered, and I will arrive on time.
- I will respect official SkillsUSA dress by not smoking while in uniform.
- I will adhere to the dress code at all times as required.
- I will maintain average grades ("C" or 2.0 GPA) and should I fail to do this, I will consult with my SkillsUSA advisor and make a plan to correct the situation. I will show improvement by the end of the next full grading period, or I know that my SkillsUSA advisor will send a report to the SkillsUSA Idaho Board of Directors.
- I will send my reports so they are received by the assigned date, regardless of my other activities.
- I will attend school each day it is in session, unless I am on a SkillsUSA assignment or ill. I will make up all work in the classes that I miss.
- I will accept SkillsUSA assignments when possible, and understand that I am to keep accurate records of all expenses incurred. I will submit the required forms and receipts within five days of completion of an assignment.
- I will submit my name on a membership roster and pay dues as a member for the year in which I am an officer.
- If involved in any activity that is detrimental to SkillsUSA and/or my school, such as a police arrest for DUI or drug charges, I will immediately forfeit my office.
- I will forfeit my office if I quit school, become suspended, or expelled before completing my program.
- I will attend or be taking classes at the school where my SkillsUSA chapter is hosted.
- I will respect authority at all times.
- I will represent SkillsUSA Idaho and my state with respect. This means that for my term of office any content I post on web sites such as MySpace, Facebook, YouTube or other sites, and my email address, must be reviewed by the state advisor/director, my advisor, or designated representative. I also understand that these web sites, and my email account will be monitored and I may be requested to remove inappropriate material.

Violations and Penalties

Violations of any of the above items may be grounds for disqualification or suspension from an activity or office. The violator will be sent home at his/her own expense. Proper notification of the violation and action taken will be sent to the state officer's parents, advisor, and school administrator.

"I understand that, by signing this contract, if I am in violation of any of the above regulations and/or conduct myself in a manner unbecoming of a SkillsUSA Idaho State Officer, I may be suspended from further state officer activity or lose my officer status. I further agree to accept the penalty imposed on me with the understanding that all such actions will be explained to me. I realize the severity of the penalty may increase with the severity of the violation."

Candidate's Signature	Date
I have read and understand the SkillsUSA Idaho State Officer Contract and agree to support its guidelines and the above named student to the best of my ability.	
Parent/Guardian's Signature	Advisor's Signature



State Officer Events and Reimbursement Schedule

State officers will be required to attend the following events. Failure to attend one of these events may result in forfeiture of the state officer position. If a state officer cannot attend any one of the events due to an extreme emergency, he/she will notify both the state director and state advisor in writing and by phone.

Note: Professional Technical Education Summer Conference- Only Boise Valley Officers will be requested to attend. June 13-15, 2012

National Leadership and Skills Conference (NLSC) in June <ul style="list-style-type: none"> • June 23 - 28, 2012 • Officers are NOT required to attend but are highly encouraged to attend as convention delegates • When fiscally possible a small stipend will be provided 	
Joint Student Leadership Conference (JSL) in August <ul style="list-style-type: none"> • August 6 – 9, 2012 • Most meals provided • Transportation to/from event will be provided or arranged • Hotel will be provided/arranged 	
Washington, D.C. Leadership and Training Institute (WLTi) in September – State secondary and postsecondary president ONLY (Optional) <ul style="list-style-type: none"> • September 15 – 19, 2012 • All meals provided • Transportation to/from event and lodging provided 	
Fall Leadership Conference (FLC) in October (Northern, Eastern, and Southwest locations) <ul style="list-style-type: none"> • Lodging, meals, and registration will be provided 	
Student Day at the Legislature (SDAL) in January – State secondary and postsecondary president ONLY <ul style="list-style-type: none"> • January 23, 2013 (dependents on legislature availability) • Lodging, meals, and registration will be provided • Mileage to/from event will be reimbursed 	
State Officer “Good Will Tour” to chapters in November/December <ul style="list-style-type: none"> • Lodging and meals will be provided • Transportation to/from event will be provided or arranged 	
State Regional Skills Championships in March <ul style="list-style-type: none"> • Lodging, meals, and registration will be provided • Mileage to/from event will be reimbursed when not participating in school event(s) 	
State Leadership and Skills Conference (SLSC) in April <ul style="list-style-type: none"> • Lodging, meals, and registration will be provided for some of the SLSC when not participating in school event(s) • Mileage to/from event will be reimbursed for some of the SLSC when not participating in school event(s) 	

I understand that failure to attend one of these events may result in forfeiture of my state officer position.

Candidate’s signature	Date
Parent/Guardian’s signature	Date

State Officer Travel Permission Form

I understand that state officers of SkillsUSA Idaho are required to travel to attend the following functions:

- PTE Summer Conference- Boise Valley students only
- Joint Student Leadership (JSL)
- Washington, D.C. Leadership Training Institute (WLTi) – Secondary and postsecondary president only (Optional)
- Fall Leadership Conference (FLC)
- Goodwill Tour
- Student Day at the Legislature (SDAL) – Secondary and postsecondary president only
- Regional Skills and Leadership Conference (RSLC)
- State Skills and Leadership Conference (SLSC)

I understand that state officers of SkillsUSA Idaho who are under 18 years of age may travel without the supervision of the state director, state advisor, or other authorized person until they reach their destination. Upon arrival at their destination, they will be supervised until their departure home.

If parents/guardians, school administrators, chapter advisors, or other caretakers are not comfortable with this requirement, they shall be responsible for providing a chaperone during travel at their own expense.

Parent/guardian	SkillsUSA chapter advisor
School administrator	

Travel Information

Major airport nearest to state officer candidate's home
List airlines with which you have a frequent flyer account
Name on ID for ticket purchase

SkillsUSA Personal and Liability Release Form

This form must be fully completed and properly signed or participation will be denied.

The participant's signature must appear on this form.

The parent's or guardian's signature is an absolute requirement for those under the age of 18.

PLEASE ATTACH PHOTOCOPIES OF YOUR MEDICAL INSURANCE CARD (FRONT AND BACK).

Read the other side of this form. If you understand and agree to the conditions, please fill out the form below and sign.

Type or print clearly.

Chapter			
Participant's Full Name (First, Middle, Last)			
Age	Birth date (day/month/year)		
Participant's Home Address			
City		State	Zip Code
Home Telephone Number (please include area code) ()			

Name of Emergency Contact Person		Family Physician		Physician's Telephone Number ()	
Contact Person's Telephone Number (please include area code) ()			Do you have any known allergies? <input type="checkbox"/> NO <input type="checkbox"/> YES		
Contact Person's Street Address			If 'yes', please list		
City	State	Zip Code	Do you have a history of allergies, heart condition, diabetes, asthma, epilepsy, rheumatic fever, or other existing medical conditions?		
Name of Person Responsible for Your Medical Bills (Guarantor)			If 'yes', please explain <input type="checkbox"/> NO <input type="checkbox"/> YES		
Guarantor's Relationship to Participant		Are you taking medication? <input type="checkbox"/> NO <input type="checkbox"/> YES			
Guarantor's Employer		Employer's Telephone Number()		If 'yes', please list what kind	
Employer's Address			Do you have any physical restrictions <input type="checkbox"/> NO <input type="checkbox"/> YES		
City	State	Zip	If 'yes', please explain		
Insurance Company			When did you last have a tetanus shot?		
Insurance Company's Address					

City	State	Zip	PARTICIPANTS- <input type="checkbox"/> CHECK HERE IF YOU ARE OVER 18 AND CAN SIGN FOR YOURSELF
Insurance Plan Number			
Insurance Group Number			
Insured I.D. Number			
If you do not have any medical insurance sign here			
			<p>Having read and understood completely the Personal Liability and Medical Release, the Code of Conduct, and the Photography and Sound Release agreements on the other side of this form, I, by signing below, do hereby agree to abide by these in their entirety and completely release SkillsUSA Idaho. Participant must sign!</p> <hr/> <p><i>Signature of Participant</i> Date</p> <hr/> <p><i>Signature of Parent or Guardian</i> Date</p>

SkillsUSA Idaho Personal Liability and Medical Release

I hereby agree to release SkillsUSA Idaho, it's representatives, agents, servants, and employees from liability for any injury to the named person, resulting from any cause whatsoever occurring to the named person at any time while attending a conference or event sponsored by SkillsUSA Idaho, including travel to and from the conference/event, excepting only such injury or damage resulting from willful acts of representatives, agents, servants, and employees. I do voluntarily authorize the SkillsUSA Idaho office assistants and/or designees to administer and/or obtain routine or emergency diagnostic procedures and/or routine or emergency medical treatment for the named person as deemed necessary in medical judgment. Parents/guardians of participant will allow emergency medical treatment to be administered as needed. Any further treatment will require parental/guardian consultation.

I agree to indemnify and hold harmless SkillsUSA Idaho and/or assistants and designees for any and all claims, demands, actions, rights of action, and/or judgments by or on behalf of the named person arising from or on account of said procedures and/or treatment rendered in good faith and according to accepted medical standards. Having read and understood completely the "Code of Conduct" of SkillsUSA Idaho, I do hereby agree to follow the procedures and practices described. I fully understand that this is an educational activity and will, to the best of my ability, apply myself for the purpose of learning and will uphold at all times the finest qualities of a person representing SkillsUSA.

NOTE: All persons under legal age must have a parent or guardian sign this form (see other side). If you are age 18 or older, please indicate that on the other side of this form. Otherwise, this form will be returned for a parent/guardian signature. All participants must sign this form.

PARTICIPANTS: Be sure that you understand the "Code of Conduct." Any person violating these rules may be sent home at their own expense, may cause other participants to be sent home, or may otherwise disqualify their chapter from participating.

Code of Conduct Agreement

This conference or event is an educational function and all plans are made with that objective. It is approved as a major educational activity by the Idaho Division of Professional-Technical Education.

SkillsUSA Idaho wants every person to have an enjoyable experience with maximum attention to safety and comfort. All participants will be expected to conduct themselves in a manner best representing the nation's greatest student organization.

In order that everyone may receive maximum benefits from their participation, this "Code of Conduct" was established by the National Board of Directors of SkillsUSA and has been adopted as a policy by the SkillsUSA Idaho Board of Directors and must be adhered to at all times. It should be noted that attendance is voluntary, not mandatory, and as such you agree to abide by the official conference rules and regulations or forfeit your personal rights to attend and participate. SkillsUSA Idaho is proud of its members, and knows that by signing this Code of Conduct, you are simply reaffirming your dedication to be the best possible representative of your chapter.

- I will at all times respect all public and private property, including the hotel/motel in which I am registered.
- I will spend each night in the room of the hotel/motel to which I am assigned.
- I will strictly abide by the curfew established and be in my assigned room at the established time. I shall respect the rights of others by being quiet after curfew.
- I will not enter a sleeping room of a person of the opposite sex, unless the person is my spouse.
- I will refrain from the use of alcoholic beverages and drugs (unless I have orders to take certain prescription drugs by a licensed physician, in which case I will have a copy of the orders of the physician with me).
- I will not leave the hotel/motel to which I am assigned without the express permission of my advisor or a designated assistant.
- I will keep my advisor or the designated assistant informed of my whereabouts at all times, according to my advisor's instructions, and leave a written explanation for my advisor whenever necessary.

- I will wear my official identification badge as required.
- I will respect the official SkillsUSA dress by not smoking while wearing it.
- I will adhere to the dress code at all times as required.
- I will attend ALL sessions, meetings, and other activities for which I am registered/assigned, and I will arrive on time.
- My conduct will be respectful and courteous at all times.

Violations and Penalties

I agree that if, for any reason, I am in violation of any of the rules of the conference or event, I may be brought before the appropriate discipline committee for an analysis of the violation. I also agree to accept the penalty imposed on me. I understand that any penalty and reasons for it will be explained to me before it is carried out. I further realize that the severity of the penalty may increase with the severity of the violation, even to the extent of being immediately sent home at my own expense.

Violations of Items 1 through 6 of the “Code of Conduct” will be grounds for immediate removal from office and relinquishment of awards and recognition. In addition, the violator will be sent home at his or her own expense. Notification of the violation and the action taken will be sent to the participant’s school district and parents or guardians.

Violations of items 7 through 12 will result in a warning and reprimand. Notification of the violation and the action taken will be sent to the participant’s school district and parents or guardians. Repeated violations of items 7 through 12 may result in the participant being sent home at his/her own expense. It is within the spirit of being a proud and meaningful member of SkillsUSA that I agree to these rules of conduct by signing my name on the other side of this page.

Photography, Web, and Sound Release

I hereby grant SkillsUSA, SkillsUSA Idaho, and the Idaho Division of Professional-Technical Education permission to make and use still or motion pictures and sound recordings, separately or in combination, as deemed necessary. Further, I relinquish all rights, title, interest in, and income from the finished product and grant them the right to give, sell, transfer, or exhibit same to any individual, firm, radio or television station or network, publication, governmental agency, and their assignees without payment or consideration from me. My agreement to perform under camera, lighting, and stated conditions is voluntary, and I do hereby waive all personal claims, causes of action, damages, against the above arising from a performance or appearance.

I give the Idaho Division of Professional-Technical Education (IDPTE), permission with respect to the image(s), (photographs, film, tape, etc.), taken of me during any SkillsUSA or SkillsUSA Idaho sanctioned event, to use the image(s) on the IDPTE Web Site along with my name in conjunction therewith, if IDPTE so chooses. I release and discharge the person(s) who took the image(s) of me, his/her heirs, executors, assigns and any designee from any and all claims and demands arising out of or in connection with the use of these images (photographs, film, tape) including, but not limited to any claims for defamation or invasion of privacy. I am of legal age (18 years old), or am the parent/legal guardian of the above subject and have read the foregoing and fully understand the contents thereof.

SkillsUSA Idaho Statesman Award Requirements Form

Last Name	First Name
Trade (Program Area)	School

Answers must be given orally to your chapter officers	Chapter Officer Initials
1. Know and state the SkillsUSA motto.	
2. Know the symbolism of the SkillsUSA emblem. State the 5 components of the emblem and what they represent.	
3. Recite the SkillsUSA pledge.	
4. Know and state the SkillsUSA theme.	
5. Know and state the colors that represent the National SkillsUSA organization and what they represent.	
6. Know and state the names of the SkillsUSA Idaho State Advisor, state director, and the national executive director of SkillsUSA.	
7. State the URL (Web site addresses) for SkillsUSA and SkillsUSA Idaho.	
8. Perform –	
9. Name the five elements of the SkillsUSA Creed.	
10. Name the seven components of the National Program of Work.	

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I certify that the above named individual has successfully demonstrated knowledge or performance of each of the required elements for this award.

_____ / _____

Chapter President/Advisor (both sign)

Date

Dr. Irene Vogel (650 W. State Street P.O. Box 83720 Boise, ID 83720-0095 – FAX (208)334-2365)
