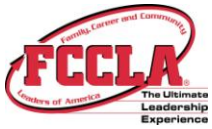


## NOMINATION FORM FOR STATE AND NATIONAL FCCLA OFFICER CANDIDATES

*Please read carefully the following information regarding selection of nominees for office:*

- All candidates who meet the qualifications as specified on the written nomination form are invited to participate in the interview process on Tuesday, January 12, 2010.
- Official dress consisting of official red blazer, white oxford cloth shirt, and coordinating tie/bow should be worn for the interview. Official blazers of various sizes will be provided by the state office at the taping site for those who need to borrow a blazer.
- Each candidate will report to the registration table for an instruction packet which will include a time schedule for region interviews.
- Each candidate will take a written evaluation over basic facts of the FCCLA organization. The "Handbook for Ultimate Leadership" and "Family and Consumer Sciences I (A-Units)" are excellent resource materials. Some questions may come from current Teen Times issues, Oklahoma FCCLA Newsletters-"FCCLA Connection", or current events related to family and consumer sciences, FCCLA, or education in Oklahoma. The candidates should be familiar with the other career and technology student organizations.
- Candidates begin the regional interview process according to the time schedule included in the instruction packet.
- The top regional candidates will advance to general interviews and be interviewed by a general committee. Regional candidates who do not advance to the general interview will be free to leave after the general interview information has been posted.
- Each candidate interviewed by the general committee will present a one-minute professional speech that will be videotaped. **No props, including hats or caps will be permitted.** The speech, "Why I Would Like to Serve on The FCCLA State Executive Council" should address reasons the candidate would like to serve on the State Executive Council and what qualities the candidate could bring to the council. Each candidate should come prepared to present a one-minute speech to the region interview team. Only those candidates who advance to the general committee interviews will present their speeches for taping. Only the taped speeches of those candidates who are placed on the ballot will be available for viewing. Candidates should not mention the name of their school, chapter, hometown, region, or office they prefer in their speech. Official dress consisting of official red blazer, white oxford cloth shirt, and coordinating tie/bow should be worn for the taping of the speech. Official blazers of various sizes will be provided by the state office at the taping site for those who need to borrow a blazer for videotaping.
- Candidates are free to leave after the videotaping.
- Persons on the general committee will evaluate the qualifications of each candidate interviewed and prepare a ballot.
- Candidates will be notified by email as to whether or not they were placed on the ballot.
- All FCCLA chapters will receive a voting packet in their state convention materials, which will be sent to them in March, after they register for the state convention. Voting will take place at the state convention. Results will be announced at the closing general session, and the 2010-2011 State Executive Council will be installed.
- There will be no campaigning. The distribution of **any** campaign materials will result in disqualification. Campaign policy is attached.  
**Each candidate will be responsible for his or her own expenses to the interview.**  
**No reimbursements will be made through the state office.**



### **APPLICATION FORM**

- Use **only** the space provided on the enclosed forms.
- All nomination forms **must** be typed. (They will be disqualified if handwritten.)
- **Letters of recommendation must be provided.** A letter should be from each of the following persons:
  - a. school administrator who is responsible for the candidate
  - b. local FCCLA adviser
  - c. a community leader (**not a teacher in the school**)
- One (1) head and shoulders photograph (billfold size) of the nominee is needed for reference purposes. The nominee's picture should be enclosed with the nomination form in a **sealed envelope**. Do not cut or staple the picture.
- **Attach the chapter affiliation form with nominee's name highlighted to application.**
- **Attach an official transcript**

### **POINTS TO CONSIDER WHEN SELECTING A NOMINEE FOR A STATE OR NATIONAL FCCLA OFFICE**

1. The nominee must be affiliated with the State and National FCCLA organizations in 2009-2010.
2. The nominee must be enrolled in family and consumer sciences or occupational family and consumer sciences during the year of nomination. (Block scheduling consideration.)
3. The nominee must be regularly enrolled and attending an appropriate family and consumer sciences class sometime during the year, while serving as a member of the State Executive Council, or should resign the office. (Block scheduling consideration.)
4. The nominee must be a junior or below in school when nominated.
5. The nominee must be serving or have served as an officer in a local FCCLA chapter.
6. If elected, the nominee shall attend the following required meetings: three or four state executive council meetings, FCCLA State Convention, Career Tech University, District Officer Training, FCCLA Rookie Camp, National Leadership Conference, Summer Conference for Career & Technology Educators, Fall Leadership as well as district meetings. **(Tentative approval to attend these meetings should be cleared with the local school administrators before filing for office.)**
7. The nominee should have the following qualifications and abilities: (a) understand and know FCCLA purposes, creed, and projects, (b) have a definite interest in FCCLA and (c) be willing to give FCCLA precedence over meetings and activities of other organizations and/or teams.
8. The nominee shall agree to be a responsible representative of Oklahoma's FCCLA in whom the association can be proud and can place its trust.
9. The nominee shall have the support of the adviser, parents/guardian, and administrators and secure their signatures of endorsement.
10. A chapter may submit one name for national officer candidate and a different name for state officer candidate, or a chapter may submit the name of one person for both state and national officer candidate.



**OKLAHOMA ASSOCIATION  
FAMILY, CAREER AND COMMUNITY LEADERS OF AMERICA  
STATE AND NATIONAL OFFICER CANDIDATE FORM**

**Envelope must be postmarked no later than December 15, 2009**

**Region** Please check one  C  N  NE  SE  SW

**Type of Candidate:**

State Officer Only  National Officer Only  
 Both State and National.

I prefer:  State Office  National Office

**Type of Chapter:**

Comprehensive  Occupational

**CANDIDATE INFORMATION**

Name of Candidate \_\_\_\_\_

Home Address \_\_\_\_\_  
Mailing Address City Zip

E-Mail address \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name of Parents or Guardian \_\_\_\_\_

Emergency Contact Phone Number \_\_\_\_\_

**SCHOOL INFORMATION**

School Name \_\_\_\_\_

School Address \_\_\_\_\_  
Mailing Address City Zip

School Phone \_\_\_\_\_ School Fax \_\_\_\_\_

Current Grade Level **(Check one)**  6<sup>th</sup>  7<sup>th</sup>  8<sup>th</sup>  9<sup>th</sup>  10<sup>th</sup>  11<sup>th</sup>

Grade Point Average \_\_\_\_\_ **Attach official transcript**

Number of Family and Consumer Sciences classes completed: \_\_\_\_\_

Name of Family and Consumer Sciences class presently enrolled in: \_\_\_\_\_

**ADVISER INFORMATION**

Adviser Name \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Mailing Address City Zip

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Email address (school) \_\_\_\_\_ (home) \_\_\_\_\_

Is your adviser a member of the Oklahoma FCCLA Alumni & Associates Yes No



**2010-2011 STATE AND NATIONAL OFFICER CANDIDATE SUMMARY SHEET**

**Name of Candidate** \_\_\_\_\_

Number of Years in FCCLA \_\_\_\_\_ Number of State Conventions attended \_\_\_\_\_

**Check all that apply: (Count only activities attended as an FCCLA member!)**

Cluster Meetings Attended:  2009  2008  2007

National Leadership Conferences Attended:  2009  2008  2007

Attended: Rookie Camp  Take AIM  Chapters in Action

Check first year it is possible to join FCCLA in your school:  6<sup>th</sup>  7<sup>th</sup>  8<sup>th</sup>  9<sup>th</sup>  10<sup>th</sup>  11<sup>th</sup>

List your participation in FCCLA, offices held in FCCLA, and contributions to the Family and Consumer Sciences program below.

**Local:**

**District:**

**State:**

**National:**

List your participation in school and community: (List major activities and organizations in which involved, community activities, job experiences, etc.)

**School**

**Community Activities**

**Job Experiences**

Type below in 25 words or less, a paragraph on "What FCCLA Means to Me".



## OFFICER PREFERENCE FORM

I, \_\_\_\_\_, hereby place my name in nomination for the following office(s).

**Check all of the offices you would consider.**

President  
Secretary  
Region Vice President  
Occupational VP-Culinary Arts/Hospitality

Occupational VP – Early Care & Education  
Occupational VP – Apparel/Interior Design  
National Officer Candidate

Candidate Signature \_\_\_\_\_ Date \_\_\_\_\_

### STATE AND NATIONAL OFFICER CANDIDATE TRANSCRIPT RELEASE PARENTAL AGREEMENT

Officer Candidate \_\_\_\_\_

Candidates must submit a school transcript as part of their candidate application. By signing this form, you are agreeing to the release of the above names candidate's school transcript to FCCLA.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

### STATE AND NATIONAL OFFICER CANDIDATE WEB SITE/VIDEO/RECORDED VOICE/PHOTOGRAPHY RELEASE FORM

I \_\_\_\_\_, agree to permit my photograph to be displayed on the FCCLA Web site.  
Name of SEC Member

I further agree that I, my heirs, and my legal representatives release and hold FCCLA and the Oklahoma Department of Career and Technology Education, its officers, directors, members, employees, or agents harmless from any injury, claims, unauthorized use, misuse, actions, judgments, or other liability that may result from the display of my photograph/voice/video on the FCCLA web site.

I further understand that I am not to receive payment for said photograph/voice/video and these photograph/voice/video will not discredit or distort my person in any way.

Candidate Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_



## CODE OF ETHICS

If elected I will . . .

1. Be dedicated to the family and consumer sciences program and Family, Career and Community Leaders of America.
2. Be willing to commit the year to State Executive Council activities.
3. Be willing and able to travel without conflicts at home, work, or school.
4. Work to develop myself into an effective public speaker and project a desirable image as an FCCLA member at all times.
5. Be prompt with thank you notes, letters, reports, and other necessary or desirable correspondence.
6. Accept constructive criticism and evaluate my own performance.
7. Keep myself up-to-date on current events.
8. Forego all alcohol, drugs, and tobacco while involved in any official or unofficial activity, which represents FCCLA.
9. Maintain cleanliness and proper grooming at all times.
10. Avoid places or activities, which would raise questions as to my moral character or conduct.
11. Consider friends as secondary to Executive Council responsibilities.
12. Use wholesome language in all speeches and informal conversations.
13. Avoid participation in and actively discourage any conversations, which belittle or downgrade fellow FCCLA members, officers, and adults.
14. Serve as a member of the team; maintain a cooperative attitude; respect the thoughts and ideas of others; and demonstrate consideration for others.
15. Be willing to take and follow instructions from the state staff, and my local adviser.
16. Not abuse the office.

If elected to the Family, Career and Community Leaders of America State Executive Council, I will adhere to the Code of Ethics. Violation of the Code of Ethics could warrant removal from office.

---

**Candidate's Signature**

**Date**



**If elected to an office, I will:**

1. Affiliate with the State and National Family, Career and Community Leaders of America Association.
2. Be enrolled in a regularly scheduled family and consumer sciences or specific occupational class during my term of office.
3. Accept adult guidance at any time when representing Family, Career and Community Leaders of America.
4. Assist and share ideas with local, neighboring, and district FCCLA groups.
5. Attend all state executive council meetings and give FCCLA precedence over other organizations and activities, and teams.
6. Attend Career Tech University, June 2-4, 2010.
7. Attend and help facilitate District Officer Training, June 9-11, 2010.
8. Attend and help facilitate Rookie Camp, June 16-18, 2010.
9. Attend the FCCLA National Conference, July 3-8, 2010, Chicago, IL.
10. Attend FCCLA State Conventions Friday, April 16, 2010 and Friday April 15, 2011.
11. Assist with FCCLA Competitive Events in Stillwater, April 8-9, 2011.
12. Assist, if needed, with the FCCLA presentation to family and consumer sciences teachers at the 2010 Summer Conference.
13. Resign from my office if I am unable to assume my responsibilities due to a status change.
14. Resign from my office if I move from the state.
15. Resign from my office if I am a region vice-president and move from my region.
16. Resign from my office if I am an Occupational Vice President and cannot enroll in my specific occupational class.

My parents/guardian and I understand the obligations of serving on the Oklahoma FCCLA State Executive Council and agree to the above listed obligations. We further understand the responsibility for all personal expenses and those not paid by the local or state association. The state or local association will not be held responsible in the event of an accident. If elected, I will serve to the best of my ability and will resign if I am unable to fulfill my responsibilities.

---

Signature of Applicant	Date	Signature of Parent/Guardian	Date
------------------------	------	------------------------------	------

---

**THE NOMINEE, ADVISER(S), AND MEMBERS OF OUR CHAPTER AGREE WE WILL DO NO CAMPAIGNING FOR OUR NOMINEE**

We understand the commitments inherent in this office and pledge our support and assistance if the candidate is elected. Obligations include attendance at all required meetings and assistance in obtaining finances to attend the National Leadership Meetings. The chapter adviser shall be allowed to attend all meetings with the exception of CTU and the State District Officer Training Meeting. By signing below, the adviser and administrator pledge to provide guidance and support to the candidate during the tenure of office, and understands that the local chapter must remain in good standing with the state and national offices of the association or the candidate will be removed from office.

---

Signature of Chapter Adviser	Date	Signature of School Administrator	Date
------------------------------	------	-----------------------------------	------