**2019 APPLICATION-Candidates Code of Conduct-MN FCCLA Leadership Positions**

As a candidate for an Area Officer position, you will be expected to follow the following Code of Conduct upon signing this form. *Candidate application deadline* Candidate Application Deadline: **Feb. 13, 2019***- Submit online with candidate application or as an email with Re: Candidate application for (Name) and (chapter)*

**This becomes effective at the time you sign the application.**

You will be representing your chapter, your Area and the state association and the eyes of many people will be on you. What you do and how you do it should always leave a favorable impression. Your code of conduct should never be questionable. Read the following and sign before you continue with the rest of the candidate forms.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Chapter:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I agree to the guidelines and will promise to follow guidelines for myself from the time I sign this form.

Check each response.

\_\_\_\_\_ I will set a good example for other elected individuals and FCCLA members to follow.

\_\_\_\_\_ I will strive to do my best in the role of FCCLA officer.

\_\_\_\_\_ I will make effective use of my time.

\_\_\_\_\_ I will strive to be positive in my encouragement of others.

\_\_\_\_\_ I will agree to not drink alcohol beverages, use chemicals (drugs) or tobacco products.

\_\_\_\_\_ I will strive to have honorable and appropriate behavior in personal conduct and in the way I speak or act among my peers and adults.

\_\_\_\_\_ I will respect people within my school, local community and the FCCLA organization.

\_\_\_\_\_ I will not attend social events which I know will have the option to have alcohol, drugs or inappropriate behavior.

\_\_\_\_ I will seek ways to work as a team with my peers and adults in FCCLA.

\_\_\_\_ I will remain academically eligible in school.

\_\_\_\_\_ I agree not to post social network communication sites or post videos that would identify me, identify myself as an officer or FCCLA member that would are not pre-approved by the State FCCLA association.

\_\_\_\_ I will conduct myself as an ambassador of FCCLA and with good character and reputation for leadership and integrity on facebook, twitter and other social media sites.

\_\_\_\_ On social media sites, I agree to follow the social media guidelines established by MN FCCLA.

Signatures needed:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Candidate Date Parent/Guardian Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

 Advisor Date School Administrator Date