**2024-25 Area Officer Candidates Code of Conduct and Agreement Form**

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

You will be representing your chapter, your Area and the state association. With a formal leadership position comes an expectation that your conduct is in line with FCCLA’s values. Please read the following and sign before you complete the rest of the candidate forms.

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

I will attend:

Yes, I agreeto attend Mentor Group meetings virtually (3 times), in-person (at Statewide events indicated below), and provide members of my group with consistent communication and support.

Yes, I agree to attend Leadership Camp, **TBD in June**

Yes, I agree to attend my Area’s Fall Rally and Midwinter Meeting

Yes, I agree to attend both the 2024 and 2025 State Conferences, **April 7-9, 2024/ April 2025**

I agree to follow guidelines for myself from the time I sign this form:

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

I will strive to be inclusive, positive, and vocal in my encouragement of others.

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 refrain from the use or possession of alcohol, drugs, other controlled substances and/or tobacco including vaping, for the entire term of my office.

I will remain academically eligible in school and in good standing at my local FCCLA chapter.

I will not to post on social media or any other methods of communication or communication sites, any messages that could be considered inappropriate and inconsistent with the values and mission of the state FCCLA association.

Signatures needed:

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Candidate Date Parent/Guardian Date

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Adviser Date School Administrator Date