

FORMS

The following forms must be submitted with the online state officer application on the SkillsUSA Georgia Website. Please print, fill out, scan and upload these forms in the appropriate spot on the application. For your convenience, the forms are also available for download individually within the application.

The itemized campaign expenses form should be turned in at the state officer candidate qualification exam at the State Leadership and Skills Conference.



STATE OFFICER CANDIDATE AGREEMENT FORM

I, _____, have read and understand the qualifications of the SkillsUSA Georgia State Officer and realize the duties. If elected, I agree to be present and to participate in all required SkillsUSA Georgia activities during my term of office. And, if elected, I agree to fulfill my duties to the best of my ability.

SkillsUSA Georgia State Officers must be able to commit 3-10 hours of work per week. The dedication to the officer position supersedes all other obligations (other than academics). A State Officer must understand and make this commitment prior to applying for State Officer. By signing below you are indicating that you understand your obligations (weekly and below events) and no exceptions will be made to accommodate an officer’s extracurricular schedule. As a SkillsUSA Georgia State Officer, you will be required to attend the following activities (dates are tentative and subject to change). **Final dates will be released in April 2022.**

- State Officer Training: April 21-23, 2022-Woodstock, Ga.
- CTSO Officer Training: June 10-12, 2022- Covington, Ga.
- National Leadership and Skills Conference: June 17-24, 2022-Atlanta, Ga.
- State Officer’s Workshop- September 15-16, 2022
- Champions Rally: October 6-7, 2022-Georgia National Fair
- Fall Leadership Conference Facilitator Training- October 2022
- Fall Leadership Conference (arrive one day prior to start to conference) – October/November 2022
- SLSC Preparation Conference – January 2023
- Region Championship – January 2023
- TIEGA Conference – January 2023
- CTSO Legislative Activity – February 2023
- State Leadership and Skills Conference (arrive one day prior to start to conference) – March 8-11, 2023
- At recruiting visits to region area schools as needed.
- Virtual Chapter Officer Trainings as requested by chapters.
- At recruiting visits to business and industry as needed.

I certify that I am a member in good standing of the _____ SkillsUSA Chapter.

Candidate Signature

Date

As this SkillsUSA Georgia State Officer Candidates Local Advisor, it is without reservation that I recommend them as a SkillsUSA Georgia State Officer.

Local Advisor’s Signature

Date



CODE OF CONDUCT & PERMISSION TO PUBLISH AWKNOWLEDGEMENT

We (officer and parent(s) or guardian) have read and fully understand the SkillsUSA State Officer Code of Conduct and agree to comply with these guidelines. Furthermore, we are aware of the consequences that will result from violation of any of the guidelines outlined in the State Officer Candidate Guide.

As a SkillsUSA Georgia State Officer, the officer's name, photo, SkillsUSA Georgia e-mail address (supplied by SkillsUSA Georgia), and school contact information will be posted on the SkillsUSA Georgia web site and in printed documents (publications). The officer's home contact information will not be published electronically or in printed documents.

I give SkillsUSA Georgia permission to publish electronically and in printed documents the information and materials as described.

Candidate Name (Print)

Candidate Signature

Date

Parent/Guardian Signature

Date



STATE OFFICER CANDIDATE ENDORSEES

The credentials for _____, who is the choice of our chapter, are attached. To the best of our knowledge, this individual meets the qualifications for the office of a SkillsUSA State Officer and if elected, will receive the enthusiastic support of the school, the chapter, and the advisor in the execution of the duties of the office.

The Department of Education and local school systems operate under guidelines of the Quality Basic Education Act, established in 1986. In order to participate, students must qualify and meet the required criteria according to this law. Travel funds for instructors are not a direct line budget item from the state but are contained in the FTE formula. More than adequate funds are usually allocated and are earned by the school through FTE accounting procedures. As administrator, I agree to provide travel money for the advisor to carry out the tasks of the office for which the SkillsUSA Georgia member is a candidate.

During State and National activities, we understand that the State Director and Leadership Team will supervise the State Officers. The State Director, Leadership Team and Officer's advisor will coordinate to enable an Officer to prepare for contest participation or other requested Chapter activity as schedules permit. State Officers must commit to participate fully in all Program of Work activities.

We recognize the responsibilities of the position for which we have nominated our candidate and will assist him or her in executing responsibilities of said office, in any capacity that we can, should he or she be elected. We understand that necessary support of travel and participation is important for both the candidate and their advisor and we are willing to support their needs. We have fully reviewed and understand the SkillsUSA Georgia State Officer Candidate information overview, official application, agreement form and other related documentation.

Parent/Guardian Signature

Date

SkillsUSA Advisor Signature

Date

CTAE Supervisor Signature

Date

School Principal Signature

Date

Superintendent Signature

Date



STATE OFFICER TRAVEL AUTHORIZATION

Event or Meeting Description

Student Name

Phone

School Name

Phone

Transportation plan for arriving at the event/meeting: _____

If you will be staying overnight at a location, other than your home, on your way to the event/meeting, please describe the location, address, phone number and name of chaperone at this location.

Transportation plan for returning home from the event/meeting: _____

If you will be staying overnight at a location on your way home from the event/meeting, please describe the location, address, phone number and name of the chaperone at this location.

All students must adhere to their local school district's student transportation policy and procedures. Please attach a copy of the completed district form pertaining to student travel for this event, or complete the form on the next page.



STATE OFFICER TRAVEL AUTHORIZATION

Initial each of the following that apply:

The above named student may drive herself/himself to the above function as part of their official responsibilities.

The above named student will be transported to the above function as part of his/her official responsibilities by means of parents and/or public transportation (Check One). The above named student will be allowed to ride with another State Officer, to get to and/or from the above function as part of her/his official responsibilities.

The above named student will be allowed to ride with representatives of the state association or its agents/contractors to get to or during the above function as part of her/his official responsibilities.

The above named student will be allowed to ride with other state officers DURING the State Officer Meeting as needed to facilitate transportation. "During" is defined as the time between the scheduled start and finish of the meeting as outlined in this document. (If you do not want your child riding with other officers black out the "X" next to this item and initial to the left of it)

The Transportation Consent Form includes two pages. By signing below the parties agree to abide by all policies and information included on both pages of this form.

As a school district official, my signature below verifies that the above modes of transportation are not in violation of the _____ School District student transportation policy.

Administrator Signature

Date

I agree to adhere to the above named school transportation policy and modes of transportation.

State Officer Signature

Date

I agree to allow my child to use the above named mode(s) of transportation, and give permission for my child to attend this meeting or event.

Parent/Guardian Signature

Date



ITEMIZED STATEMENT OF CAMPAIGN EXPENSES

Description of Item	Quantity	Total Cost

TOTAL _____

We certify that the above expenses are a full and complete record of all campaign expenses and are factually accurate figures. No other expenses were made for campaign purposes.

Candidate Signature

Date

SkillsUSA Advisor Signature

Date