

New York State Officer Candidate form and Minimum Qualifications List

New York State SkillsUSA

Position (Please circle) At Large, Regional Vice President (you can run for VP and if you lose then you can run for At Large)

Please type or print clearly and neatly

Full Name _____ Nickname _____
 Home Address _____
 City _____ State _____ ZIP _____
 Home phone (____) _____ Cell (____) _____ Work (____) _____
 E-Mail (home) _____
 School Name _____ Advisor _____
 School Address _____
 City _____ State _____ ZIP _____
 School phone (____) _____ School fax (____) _____

Minimum Qualifications

The officer candidate (**attach supporting data**):

- A. Has active membership status (as defined by SkillsUSA's Board of Directors) at the school where the chapter is established and student is enrolled at the time of the application and must continue in the training program at least one more year.
- B. Has at least one full year remaining in a secondary preparatory CTE trade, industrial, technology or health occupations program
- C. Has an occupational objective in trade, industrial, technology or health occupations field, and this must be of record
- D. Must be available to represent the New York State organization through personal appearances, and other appearances as assigned.
- E. Will abide by State policy which prohibits competition in the NY State SkillsUSA Championships while serving term as a State Officer. NOTE: May compete as a National Officer Candidate.
- F. Will file candidacy for office (all forms) with the New York State Coordinator no later than **February 1, 2025**.
- G. Will respect the nomination, election and campaign policy restrictions.
- H. Will complete all other necessary State officer candidate forms.
- I. Has demonstrated knowledge implied in the *SkillsUSA Leadership Handbook*

State Officer Candidate	/ /	SkillsUSA Advisor	/ /
	Date		Date
Parent/Guardian	/ /	CTE Administrator	/ /
	Date		Date

Important information!

Forms received after the deadline or missing forms and/or signatures May result in disqualification as a candidate.

New York State Officer Candidate Personal Data Form

New York State Officer Candidate's Name as it should appear on the ballot:

Preferred mailing address:

Home Address _____
City _____ State _____ ZIP _____
Home phone (____) _____ Cell (____) _____ Work (____) _____
E-Mail (home) _____ Age _____ Date of birth _____

Clothing

Please visit a local clothing store to be properly fitted. Please allow room for growth

SkillsUSA Blazer Size Men/Women # _____ Regular /Long
Dress Shirt Size: Small Medium, Large X Large 2XL 3XL Other _____
Polo Shirt Size: Small Medium, Large X Large 2XL 3XL Other _____
Sweater Size: Small Medium. Large X Large 2XL 3XL Other _____

Travel Information

Airport I will be using _____
City and State: _____
Number of miles from home to airport terminal: _____

Please complete ALL information.

Type or PRINT neatly.

School Name (Entire proper name—no acronyms/abbreviations) _____

School Address, City, State and ZIP _____

(School Telephone Number and area code and Fax) _____

(Please print clearly your name for name badge!)

Name _____

Correspondence: Names of individuals, complete addresses and **email address** who should receive copies of correspondence (please include your local advisor and school principal of the school you are attending).

Name _____	Name _____
Address _____	Address _____
City, State, ZIP _____	City, State, ZIP _____
Phone (____) _____	Phone (____) _____
E-mail _____	E-mail _____

Name _____	Name _____
Address _____	Address _____
City, State, ZIP _____	City, State, ZIP _____
Phone (____) _____	Phone (____) _____
E-mail _____	E-mail _____

Please complete the following sentences. *(Attach a separate sheet of paper if needed).*

I want to become a state officer because:

As a state officer, I want to accomplish the following:

I like my career and technical area because:

The best thing about my instructor is:

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

My long-range goal is: _____

Please list parent/guardian's name(s) and contact information

Name _____ Name _____

Address _____ Address _____

City, State, ZIP _____ City, State, ZIP _____

Phone (_____) _____ Phone (_____) _____

E-mail _____ E-mail _____

New York State Officer Contract

As a New York State officer of **SkillsUSA**. (Name) _____ has 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, business and industry Representatives during your term of office. Your actions will set a standard for all SkillsUSA members to follow. When you sign this **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**, I agree to adhere to the following rules and regulations:

1. I will, at all times, respect all public and private property.
2. When traveling for NYS SkillsUSA, I will spend each night in the room of the hotel/motel to which I am assigned.
3. When traveling for NYS SkillsUSA, I will abide by the curfew established and shall respect the rights of others.
4. I will not use alcoholic beverages or nonprescription drugs at any time.
6. When traveling for NYS SkillsUSA, I will not leave the hotel/motel to which I am assigned without the express permission of the assigned SkillsUSA staff person(s).
7. My conduct will be exemplary at all times, during and outside of SkillsUSA functions. Any behaviors contrary to SkillsUSA's culture of inclusion and diversity will result in disciplinary action.
8. I will forfeit my office if I leave school before completing my training program, am suspended, or expelled.
9. I will respect authority at all times.
10. When traveling for NYS SkillsUSA, I will keep the assigned SkillsUSA staff person in charge informed of my whereabouts at all times.
11. I will attend all activities for which I am assigned, registered and will be on time to all functions and assignments.
12. I will adhere to the dress code at all times.
13. I will attend the following functions as assigned: SkillsUSA National Conference and training (7 days), State Officer Training (4 days), WLTI (5days), Fall Leadership (5 days), and Skills Conference (4 days), others as assigned
14. I will send State officer reports to be received by the assigned date regardless of my other activities.
15. I will strive to maintain average grades in all my classes.
16. I will attend school each day it is in session, unless I am on official SkillsUSA business or ill. I will make up all work missed.
17. I will accept NYS SkillsUSA assignments when possible and understand I am to keep accurate records of all expenses incurred. I will submit the proper vouchers and receipts to SkillsUSA within five days of completion of an assignment.
20. I will submit my name on a membership roster and dues as a member for the year in which I am a State Officer.
21. If involved in any activity that is detrimental to SkillsUSA, and/or my school, such as police arrest for DUI or drug charges, I will immediately forfeit my office.
22. I will attend or take classes at the school where my SkillsUSA Chapter is based.
23. As an officer of NYS SkillsUSA, I will represent my organization with respect. That means that for my term of office, any content I post on the Internet, for example, on Facebook, YouTube or other Web sites, must be reviewed by an authorized adult such as my advisor, parent or guardian. I also understand these Web sites will be monitored, and I will be requested to remove offensive material or any material not reflecting SkillsUSA's culture of inclusion and diversity. If I fail to do so and post inappropriate, unapproved or any material contrary to SkillsUSA's culture of inclusion and diversity, I will be put on probation as an officer and subject to the consequences of my advisor, school and/or state advisor or SkillsUSA national staff member. I also understand my personal e-mail address must reflect a professional image, or I will create a new e-mail address for SkillsUSA correspondence. Please supply all Web site URL addresses and e-mail addresses.

Violations and Penalties

Violations of any items in this contract may result in a warning and/or reprimand. Violations may be grounds for disqualification or suspension from an activity or office. The violator may be sent home at his/her own expense.

Proper notification of the violation and action taken will be sent to the appropriate state department of Education official(s) and parents or guardians.

I understand that, by signing this contract and if elected, if I am in violation of any of the above regulations And/or conduct myself in a manner unbecoming of a SkillsUSA New York officer, I may be removed from Office or suspended from travel appearances. 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.

_____/_____/_____
Signature of Candidate Date

I have read and understand the SkillsUSA New York Officer Contract and agree to support its Guidelines and the above-named student to the best of my ability:

_____/_____/_____
Parent/Guardian Date SkillsUSA Advisor Date

_____/_____/_____
CTE Administrator Date Home High School Administrator Date
(If attending a career or technical center)

Mail or E-Mail Application and all forms to:
Midge McCloskey, NYS SkillsUSA Director
21 Pine Knoll Dr.
Rochester, NY 14624
Cell phone 585-733-6546
E-Mail mmccloskey@nysskillsusa.org