

OFFICER APPLICATION



Each candidate for a Texas FBLA office must return all forms in this packet with appropriate signatures and include:

- (1) this **application**. **Please print plainly and legible!**
- (2) a current, **official**, high school transcript through the fall semester
- (3) a **resume** including education, work experience, volunteer experience, organizations and sports
- (4) the **Authorization for Medical Treatment** form which **must be notarized**
- (5) a copy of **both sides of your health insurance card**

ALL PAPERWORK MUST BE UPLOADED BY DECEMBER 18, 2024 :

Mrs. Donna Crook, Texas FBLA State Officer Coordinator
E-mail: stateofficercoordinator@fblatx.org (C) 903.570.1336

Officer Information

LEGAL NAME (First) _____ (Middle) _____ (Last) _____

CIRCLE Gender at Birth: MALE FEMALE

STREET _____ CITY _____ ZIP _____

NICKNAME _____ S LC EVENT ENTERED _____

E-MAIL ADDRESS _____ BIRTHDAY _____

PARENTS' PHONE () _____ YOUR CELL PHONE () _____

Circle office sought: President **Secretary** Reporter-Historian **Parliamentarian** Area 1 VP **Area 2 VP**
Area 3 VP **Area 4 VP** Area 5 VP **Area 6 VP** Area 7 VP **Area 8 VP** *Virtual Chapter VP*

BLAZER (Man's) **Circle:** Regular Long **Circle Size:** 36 38 40 42 44 46 48 50 *

BLAZER SIZE (Ladies) **Circle size:** 2 4 6 8 10 12 14 16 18 20

POLO SHIRT SIZE: **Circle** Ladies Mans **Circle Size:** Small Medium Large XL 2XL 3XL

BASEBALL SHIRT: **Circle Size:** Small Medium Large XL 2XL 3XL

SPECIAL FOOD CONSIDERATIONS (vegetarian? allergies? etc.) _____

AIRPORT YOU PREFER TO USE _____

NUMBER OF YEARS IN FBLA _____ FBLA OFFICES HELD _____

CURRENT GRADE: (circle one) FRESHMAN SOPHOMORE JUNIOR SENIOR

LIST BUSINESS SUBJECTS COMPLETED OR IN WHICH YOU ARE CURRENTLY ENROLLED:

Subject	Grade Received	Subject	Grade Received

Adviser Information

LEGAL NAME _____ BIRTHDAY _____
(Need year – for airline)

STREET ADDRESS _____

CITY _____ ZIP _____

E-MAIL ADDRESS _____

HOME PHONE (_____) _____ CELL PHONE (_____) _____

POLO SHIRT SIZE: (Will need a check for \$35 if you want polo.)

Circle Ladies Mans Circle Size: Small Medium Large XL 2XL 3XL

BASEBALL SHIRT: Circle Size: Small Medium Large XL 2XL 3XL

School Information

NAME OF SCHOOL _____

STREET ADDRESS _____

CITY AND ZIP _____

SCHOOL PHONE (_____) _____ FAX (_____) _____

PRINCIPAL'S NAME Mr. /Ms. FIRST _____ LAST _____

ADVISER'S SCHOOL PHONE (_____) _____ EXT. _____

OFFICER SUPPORT

* Mandatory Signature

I, _____, as the **candidate**, agree to adhere to the State Officer Candidates Rules and Regulations. I understand that if I do not attend Officer Training or if I do not remain academically eligible to participate in extracurricular activities I will automatically be removed from office. If I fail to fulfill the responsibilities of my office or follow the Professional Code of Conduct, I am subject to removal from office by action of my adviser and/or the State Officer Coordinator. Furthermore, if I am unable to fulfill my role as officer, I will be financially responsible for reimbursing Texas FBLA for any expenses incurred on my behalf. This includes but is not limited to travel expenses, meals, clothing, supplies, etc.

I, _____, as the **chapter president**, agree that our local chapter will enthusiastically help in conducting a clean, honest campaign for our candidate, will contribute to some of the expenses of the campaign and the term of office, and our members will help the candidate fulfill the duties of the office if elected.

I, _____, as a **chapter adviser**, have read and understand the candidate material, will support and monitor this candidate/officer and believe he/she is capable of fulfilling the responsibilities of office. If the candidate is elected, I understand that an adviser is required to attend officer training.

I, _____, as a **parent/guardian**, have read and understand the candidate material, verify that our family will support the candidacy and if the candidate is elected, will support the officer in completing the duties of the office. I also understand that if my child is removed from office he/she will be required to reimburse Texas FBLA for monies spent on his/her behalf.

I, _____, as **principal**, verify that the student is academically eligible for election and that the school will support the officer and the adviser financially and in the time commitment necessary to fulfill the responsibilities of that office.

By our signatures we acknowledge that failure to perform officer responsibilities as assigned will result in removal from office. We realize that limited funds are available from Texas FBLA only for required expenses for state officers with limited funds for an adviser. The majority of adviser expenses must be covered by the local chapter, the school district, businesses, or personal funds.

***Candidate**

***Chapter President**

***Mother/Parent/Guardian**

***Father/Parent/Guardian**

***Adviser**

***School Administrator**

STATE OFFICER CODE OF CONDUCT

As the elected representatives of the student members of FBLA, State Officers assume and accept a high degree of responsibility to conduct themselves in a manner that brings credit to themselves, the organization, and the members.

Because ultimate responsibility for FBLA's finances, procedures and policies of necessity remain the sole purview of the elected Board of Directors, the state officers are precluded from:

1. Entering into any contractual relationship on behalf of the organization and
2. Committing the organization to any policy or payment without specific authorization of the Board of Directors or the State Officer Coordinator.

By signing this State Officer Code of Professional Conduct, individual officers agree to abide by the policies described below and to assume responsibility for their conduct while serving as a state officer. The specific areas of violation are listed to provide guidance to the officer, and are not to be considered all-inclusive.

Professional Responsibilities and Standards

As a State Officer, I will:

- A. Abide by the State Officer Dress Code while representing the association.
- B. Complete and submit all reports and assignments on time and correctly formatted.
- C. Attend and participate in all called meetings, conferences, and workshops.
- D. Comply with all conference and workshop rules and regulations including curfews, dress codes, etc.
- E. Follow instructions given by the State Officer Coordinator of Texas FBLA or his/her designee.
- F. NOT use tobacco products while at any FBLA function.
- G. NOT use profanity or other vulgar or inappropriate language or behavior.
- H. NOT lie, cheat, or steal.
- I. NOT consume or possess alcoholic beverages or other controlled substances while representing the organization.
- J. NOT engage in any activity that may be perceived as violating the rules of conduct for the functions I attend as a State Officer, and I will follow the higher standard of conduct of either the function or the State Officer Code of Conduct.
- K. Obtain advance approval from the State Officer Coordinator or other designee for all activities where the officer is representing Texas FBLA.
- L. Perform all conference and workshop duties, for the full term of office as defined by the State Officer Coordinator.
- M. Abide by Texas FBLA's Policies and Procedures, Code of Conduct, and Bylaws.
- N. Remain academically eligible in accordance with the Commissioners Rules for Extra Curricular activities Chapter 76. These guidelines can be found on the TEA website at <http://www.tea.state.tx.us/rules/tac/chapter076/index.html>.

As a State Officer, I will not:

- A. Violate the local, state or federal laws, including but not limited to:
 - 1. Consuming or possessing alcoholic beverages or other controlled substances
 - 2. Use any tobacco products
 - 3. Theft or other felony crimes
- B. Represent someone else's work as my own.
- C. Engage in any manner of sexual conduct/harassment or other activities they may discredit the organization, the school, or the officer (includes written or verbal comments and all forms of physical contact.)
- D. Discriminate against others.
- E. Violate one or more of the Professional Responsibilities and Standards to a degree deemed unacceptable by the State Officer Coordinator (i.e. use profanity to a staff member or adviser, use of alcohol or tobacco, or non-performance of duties and responsibilities).
- F. Date or become romantically involved with any other member of the officer team or use my position as a state officer for dating purposes during the term of office.
- G. Hold a volunteer or paid position that does not reflect positively on the organization.

Violations of the State Officer Code of Conduct will result in disciplinary action and may result in the officer's removal from office. A violation of the Code of Conduct does not necessarily have to be associated with the officer's representation of FBLA. Violations will be documented and penalties assessed by the State Officer Coordinator. Officers may appeal the decision to the Board of Directors.

The Chapter Adviser and officer will be notified in writing of any violation when the penalty is assessed.

I, _____, understand and agree to this Texas FBLA Code of Conduct.

*Officer Signature

Date

I have read the above and understand this Code of Conduct as it pertains to the State Officer Candidate. By signing you agree you have read all of the application and the informational packet that is available in another document.

*Father/Parent/Guardian Signature

Date

*Mother/Parent/Guardian Signature

Date

*Chapter Adviser

Date

*State Officer Coordinator Signature

Date

EXPENSES AND TRAVEL

The duties of an FBLA state officer require them and an adviser to travel several times throughout their term of office. Officers who do not attend a required meeting will automatically be removed from their office. The following trips are integral to the duties of a Texas FBLA State Officer. Each description outlines the purpose and expectations. Please initial next to each to confirm understanding and support.

1. State Leadership Conference (SLC)

When: February 28, 2026 to March 2, 2026

Where: Kalahari Resort, Texas

Description: Officers will lead workshops, network with members and advisers, and represent Texas FBLA at this flagship event. Advisers and the candidates attend but FBLA pays no expenses. Officers and Candidates are required to attend SLC at the end of their terms and he/she arrives a day early. The officers travel to SLC, hotel and meals are covered by Texas FBLA. The adviser’s arrival travel, one night hotel and dinner for the early arrival of one adviser are also covered by Texas FBLA. Elected officers and one adviser will have complimentary registration to SLC.

Initials:

Adviser: _____

Parent/Guardian: _____

Administrator: _____

2. Mid-year/Strategic Planning Session

When: October 23-24, 2025

Where: Round Rock, Texas - Kalahari Resort

Description: Officers will participate in a comprehensive planning session to review the progress of ongoing initiatives, assess goals, and refine strategies for the remainder of the year. This session focuses on leadership development and enhancing the effectiveness of state-level programs.

Initials:

Adviser: _____

Parent/Guardian: _____

Administrator: _____

3. Officer Training & Conferences - Summer

When: June 9-13, 2025

Where: Denton, Texas

Description: Officers will participate in a comprehensive leadership training session designed to equip them with the tools to be effective leaders, as well as team-building activities to prepare for the upcoming school year. This event will also include officer-specific training to ensure all state officers are prepared for their roles and responsibilities. This may include summer conferences for recruiting. Officer and Adviser expenses are covered by Texas FBLA for OT and any conference officers are asked to attend.

Initials:

Adviser: _____

Parent/Guardian: _____

Administrator: _____

4. National Leadership Conference (NLC)

When: June 28-July 2, 2025

Where: Anaheim, California

Description: Officers will represent Texas FBLA at the National Leadership Conference, competing in events, participating in leadership development workshops, and networking with FBLA members and professionals from across the nation. This event requires out-of-state travel and will incur additional costs for registration, travel and accommodation.

Initials:

Adviser: _____

Parent/Guardian: _____

Administrator: _____

5. National Fall Leadership Conference (NFLC)

When: November 2025

Where: TBD (Out-of-State Travel)

Description: Officers will participate in leadership workshops, connect with national officers and other state officers, and represent Texas FBLA at a national level. Please note that this event requires **out-of-state travel and may incur additional travel costs.**

Initials:

Adviser: _____

Parent/Guardian: _____

Administrator: _____

6. CTSO at the Capitol

When: Spring 2026

Where: Texas State Capitol, Austin

Description: Officers will advocate for career and technical education, engage with state legislators, and represent Texas FBLA in support of CTE initiatives. Expenses are covered by Texas FBLA for officers attendance at the Capitol.

Initials:

Adviser: _____

Parent/Guardian: _____

Administrator: _____

If a school district requires an adviser to travel with an officer, the expenses of the adviser will be the responsibility of the chapter or school district and not Texas FBLA. My signature below signifies my understanding of the above travel requirements and related expenses.

*Officer Candidate

Date

*Adviser

Date

*School Administrator

Date

**AUTHORIZATION FOR MEDICAL
TREATMENT TEXAS FUTURE BUSINESS
LEADERS OF AMERICA**

I, the parent/legal guardian of _____, a Texas FBLA State Officer, give my permission for the State Officer Coordinator or any other designee to authorize medical treatment for my child should it become necessary while on an FBLA sponsored activity, with the understanding that I will be responsible for payments, and that I will be contacted at the earliest opportunity. If a change in my child's medical condition or medication occurs, I will immediately notify the State Officer Coordinator. I have furnished a copy of my insurance card and give them permission to use it on my child's behalf.

List any medical conditions the officer may have; if none, list NA:

List any medications and the dosages the officer is currently taking; if none, list NA: _____

I give permission for the FBLA State Officer Coordinator to give my child the following over-the-counter medications as deemed necessary (Tylenol, aspirin, etc.). If none, list NA.

Please provide any additional medical information the Texas FBLA State Officer Coordinator will need to know about your child, especially allergies and asthma. If none, list NA

IN CASE OF EMERGENCY

You must attach a copy of the front and back of your insurance card.

Father/Male Guardian: _____

Work Phone: (_____) _____ Company _____

Home Phone: (_____) _____ Cell/Pager: (_____) _____

Home Address: _____
Street City ZIP

Mother/Female Guardian: _____

Work Phone: (_____) _____ Company _____

Home Phone: (_____) _____ Cell/Pager: (_____) _____

Home Address: _____
Street City ZIP

Insurance Carrier: _____ Policy #: _____

Insured Employee's Name: _____

Employer: _____

Signature of Parent or Legal Guardian

NOTARIZATION

STATE OF TEXAS
COUNTY OF _____

Before me, a Notary Public in and for the State of Texas, personally appeared _____, known to me to be the person named herein who has sworn that he/she executed the document above for the purposes stated.

Date

Notary Public



PROPOSED PLANS FOR OFFICE



In the space below or on a separate, attached page, type what significant proposed plans you have for your term of office. Include goals, activities, and ideas to promote and strengthen Texas FBLA.

Texas Future Business Leaders of America

PARENT'S or GUARDIAN'S/DISTRICT APPROVAL

FBLA STATE OFFICER TRAVEL IF SCHOOL CHAPERONE IS NOT ATTENDING

I hereby certify that _____ has my approval to travel without a chaperone to FBLA State Officer functions. Once the officer arrives at destination the State Officer Coordinator (Donna Crook Cell: 903.570.1336) will be the responsible chaperone.

Name of Meetings: Officer Training (an adviser should attend) National Fall Leadership Conference (TBD), Recruitment Conferences, Strategic (Mid-Year)Planning (TBD) State Leadership Conference .

Organization: Texas FBLA

I understand and realize that the Texas Future Business Leaders of America is not legally liable under Texas laws for injuries of any nature at any time or any place to any persons, pupils, teachers, other employees, or any other person whatsoever.

Donna Crook and/or State Adviser will be the chaperone(s) (**once students arrive at their destination**) for the conference or meeting, will expect all officers who are participating in the program to give him, or her, their complete cooperation and to comply with all requests governing their conduct and activities.

Students will travel by plane (most of the time), unless other arrangements have been made by State Officer Coordinator to travel to the meetings. Texas FBLA will make travel arrangements for ALL required meetings Officer Training, Strategic (Mid-Year) Planning, State Leadership Conference).

*Signature of Mother/Guardian

*Signature of Adviser

*Signature of Father/Guardian

*Signature of Principal

Date