**Application Information**

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year in School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years in FFA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Highest Degrees Earned: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your chapter have one or more candidates running for state officer? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Advisor Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List all convention commitments and possible conflicts below. Serving on the nominating committee is a full-time commitment during convention. You may **NOT** serve on the nominating committee and delegates in the same year due to time conflicts.

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**Advisor Agreement**

By signing below, I/ We recommend this applicant to serve on the state officer nominating committee as a student representative. I/We believe that this student will be an asset in choosing the leaders of Alaska FFA for the upcoming year. I believe that they will contribute seriously and honestly and abide by the below stated rules. I recommend them for the Nominating Committee for the State FFA Officer Selection Process. Furthermore, I agree that I will not ask for any information from any Nominating Committee member that is prohibited by the rules listed above.

Advisor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**In the space provided below, answer the following questions in 200 words or less:**

What qualities do you possess that will be an asset on the State Officer Nominating Committee?

In your opinion, what are three qualities should an Alaska FFA State Officer possess?

What is more important; someone who has leadership ability, or someone who is willing to learn leadership abilities?

List an interview question or describe any evaluation activities you would like the committee to use in evaluating candidates this year (in 30 words or less).

| **Submission Requirements**This form is due by 5pm on March 7th via email to nomcom@alaskaffa.org.Document name MUST be: NomCom- Last Name, First Name***Submissions that are mailed in or in hard-copy format will not be accepted.*** |
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**APPLICANT COMMITMENT**

Carefully read and understand the following commitments before signing. You will be expected to uphold all of the specified commitments if asked to serve on the State Officer Nominating Committee. Failure to follow these may result in removal from the committee.

1. I will be present, in full Official Dress and on time to all Nominating Committee functions.

2. I will be fair and unbiased towards all candidates, especially any I have a personal acquaintance with.

3. I will serve as a member of the Nominating Committee TEAM and cooperate in all committee activities.

4. I will not discuss or reveal any of the committee’s decisions or discussions at any time, to anyone, other than those serving with me on the Nominating Committee or approved State FFA Staff before the official announcement.

5. I will not share any information about individual Officer Candidates, the Officer Candidates as a group or decisions/conversations of the Nomination Committee BEFORE, DURING or AFTER the convention with anyone including members, advisors, and Officer Candidates.

6. I will not make negative comments that do not directly pertain to the evaluation process about any Officer Candidate, to those not immediately involved in the selection of candidates, before, during or after the selection.

7. I will be present on Day 1 of Convention for Nominating Committee Training, as well as at any pre-convention virtual training.

8. I will always remember that my words and decisions during and after the selection will have an impact on the lives of real people and the Alaska FFA Association as a whole.

Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_