



WISCONSIN
ASSOCIATION OF FFA

STATE OFFICER CANDIDATE APPLICATION



REVISED 3.2023

BECOMING A STATE FFA OFFICER

APPLICATION DUE DATE SET EACH YEAR

ELIGIBILITY

- A) A chapter may recommend two candidates for State FFA Office each year.
- B) State FFA Officer Candidates must have received or will be receiving their State FFA Degree at the time of running for state office at the State FFA Convention.
- C) Official application, resumes, and all required forms must be submitted online by **the due date**.
- D) Required Criminal Background Check Form will be completed following receipt of application. The State FFA Advisor will send online link to complete the Criminal Background Check Form.
- E) State Officer Candidate information that is submitted to the Wisconsin FFA Center beyond the due date will lose 5 points per day up to 5 business days. Once the 5-business day grace period expires, the candidacy for state office will be denied.

PROCESS TO APPLY:

- A) Complete the State FFA Officer Application. **Please do not use font size smaller than 10pt.**
 - **NOTE:** Candidates will be able to indicate if they are willing to serve in a section outside of their own. If there is a vacancy or lack of qualified candidates, candidates may have an opportunity to serve in another section if indicated on the application.
- B) Prepare an official resume (example on Wisconsin FFA Website). A PDF file must be submitted. Resume must include, but not limited to:
 - Name, Educational Information, SAE, FFA Activities and Awards, School Activities and Awards, Community Activities, Candidate Statement, and Advisor Statement
- C) Read through and sign the **Wisconsin Association of FFA and Department of Public Instruction Policies for State Officers**. Both the candidate and their parent(s) need to agree with these policies. Please print, sign, scan, and upload these documents. Electronic signatures will not be accepted.
- D) Read through the **Statement of Responsibility, including the Duties of the State Officer Advisor and Information for Parents**. Provide all necessary signatures and initials required. It is important that advisors, parents, and administrators fully understand their role with a State FFA Officer. Their signatures indicate their agreement to the support the candidate. Please print, sign, scan, and upload these documents. Electronic signatures will not be accepted.
- E) Upload all items of the application to the online submission form by the indicated due date.

ELECTION MATERIAL CHECKLIST

ELECTION MATERIAL CHECKLIST IS SUBJECT TO CHANGE ON A YEARLY BASIS

APPLICATION

- Submitted electronically to the Wisconsin FFA Center on or before **the due date**.

RESUME

- Resumes should be no longer than 1 page front and back or 2 pages (one side only). Resumes should include an advisor statement and a candidate statement on the second page. Candidates may not make any corrections to the resume after the due date. The FFA staff will make no additions or corrections to any resume at any time.
- Submitted electronically to the Wisconsin FFA Center on or before **the due date**.

POLICIES AND STATEMENT OF RESPONSIBILITIES

- All signatures obtained, scanned, and uploaded. Electronic signatures will not be accepted.
- Submitted electronically to the Wisconsin FFA Center on or before **the due date**.

MEDIA FORM

- Submitted electronically to the Wisconsin FFA Center on or before **the due date**.

BRING THE FOLLOWING MATERIALS TO THE SELECTION INTERVIEWS:

COPIES OF RESUME

- Candidates will be asked to provide copies of their resume to the delegates of their section if they are selected as one of the top two candidates in their section (approximately 50-55).
- Make sure to have 25 additional copies along to share with the newly elected state officers, their advisors, and staff if you are elected to a state office.

REMINDER OF EVENTS AT STATE CONVENTION

CANDIDATE INTERVIEWS

- Will be held the Monday of State FFA Convention, at the Alliant Energy Center in Madison, Wisconsin.

WISCONSIN ASSOCIATION OF FFA STATE FFA OFFICER CANDIDATE APPLICATION

TO BE FILLED OUT BY THE CANDIDATE

IMPORTANT:

Include with the PDF of this application: candidate resume, Wisconsin Association of FFA and DPI Policy for State Officers, and signed copy of the "State FFA Officer Candidate Statement of Commitment and Responsibilities."

Name: _____

Phone: (____) _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

E-mail Address: _____

Parent(s) or Guardian(s) Name: _____

Date of Birth: _____ Age: _____ Year FFA Membership Began: _____

FFA Chapter: _____

Name of High School Attended: _____

Years in Agriculture Education Completed: _____ Year Received State FFA Degree: _____

Number of Years as an Active FFA Member: _____

Agricultural Education Instructor(s) in High School: _____

Date Graduated from High School: _____ Year in College: _____ Major: _____

Would you be willing to serve as a state office in a section other than your own? If so, indicate section(s).

____ Section 1

____ Section 2

____ Section 3

____ Section 4

____ Section 5

____ Section 6

____ Section 7

____ Section 8

____ Section 9

____ Section 10

____ Not willing to serve in another section.

FUTURE PLANS:

I. SUPERVISED AGRICULTURAL EXPERIENCE PROGRAM

Kind of Enterprise	Scope	Percent Owned or Major Responsibilities in SAE

Briefly highlight the progression of your SAE program.

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II. FFA INVOLVEMENT

List your involvement in FFA-related leadership activities. Please include three leadership positions held, three conferences or events attended, and three awards or achievements.

LEADERSHIP POSITION, ACTIVITY, OR ACHIEVEMENT	YEAR(S) INVOLVED

How have these experiences mentioned above helped you to grow, and how will they benefit you if you are elected to a State FFA office?

What is a MAJOR contribution you have made in your local chapter?

III. NON-FFA INVOLVEMENT

Please list non-FFA school and community activities you've been involved in and the level at which you participated in them.

ACTIVITY	YEAR(S) INVOLVED OR HIGHEST LEVEL OF PARTICIPATION

How has being involved in these activities impacted you?

Why do you want to serve as a state officer for the Wisconsin Association of FFA?

WISCONSIN ASSOCIATION OF FFA AND THE DEPARTMENT OF PUBLIC INSTRUCTION POLICY FOR STATE OFFICERS

In order that there are no misunderstandings, the Wisconsin Association of FFA would like each state officer candidate and his/her parents to read and agree to the following association policies. All policies will be strictly enforced.

THE FOLLOWING ARE OFFENSES THAT WILL CAUSE DISMISSAL FROM STATE FFA OFFICE:

- A) Any use of alcohol or look-alike, and/ or supply of alcohol or look-alike to members or others. State FFA officers will forego all alcohol while involved in official or unofficial FFA activities from the day the officer is elected until he/she installs a new state officer. This means 24 hours a day, 7 days a week, for 365 days. This means anywhere within the United States and any International travel.
- B) Any use and/or supply of controlled substances (drugs) or look-alike, not under direction of physician. In addition, any use of tobacco or tobacco related products or look-alike is prohibited.
- C) Participation in any illicit or promiscuous acts.
- D) Commission of any felony against the laws of State or Nation.
- E) Other violations of codes of ethics and responsible behavior so identified that may be acted upon by the State FFA Board of Directors.

The above violations apply to any FFA activity (official or unofficial) or membership involvement by the State FFA Officers, individually or as a group.

If any of the above violations occur, the state officer or officers will be asked to appear before the entire State FFA Board of Directors to give a complete explanation of the incident which occurred. The State FFA Board of Directors will then rule on a dismissal of the officer or officers involved.

I certify that I have reviewed and understand the Wisconsin FFA Policy concerning behavior of officers of the Wisconsin Association of FFA.

SIGNATURE OF STATE OFFICER CANDIDATE

SIGNATURE OF PARENT/GUARDIAN

Date

Date

STATE FFA OFFICER CANDIDATE STATEMENT OF COMMITMENT AND RESPONSIBILITIES

If elected as an officer of the Wisconsin Association of FFA, I promise to abide by the following:

I. PERSONAL RESPONSIBILITY AND CONDUCT

Please initial

- A) Accept personally the “FFA Code of Conduct and Ethics” and attempt at all time to reflect favorably upon the organization represented and the State FFA Officer team. _____
- B) Forego all alcohol, tobacco, and illegal substances at all times during my year of service to the FFA. _____
- C) Avoid places or activities that in any way would raise questions as to one’s moral character or conduct. _____
- D) Use wholesome and appropriate language in all speeches and informal conversations. _____
- E) Wear the FFA jacket as described in the Official FFA Manual- “The Proper Use of the Official FFA Jacket.” _____
- F) For all occasions both in official dress and in casual dress, observe standards of dress and total personal grooming, as well as standards of personal conduct, as established and demonstrated by the National FFA Officers. _____
- G) Conduct myself in a manner which commands respect without any display of superiority. _____
- H) Maintain and protect my health. _____
- I) Treat all FFA members equally by not favoring one over another. _____
- J) Accept the dismissal conduct policies of the Department of Public Instruction for CTSO (Career and Technical Student Organization) State Officers (Attached). _____

II. PERSONAL GROWTH

- A) Evaluate periodically my personality and attitudes making every effort to improve myself. _____
- B) Accept and seek out constructive criticism and evaluation of my total performance. _____
- C) Through preparation and practice, develop myself into an effective public speaker and display a desirable image of the FFA at all times. _____
- D) Regularly and promptly write ALL letters, thank-you notes, and other correspondence, which are necessary and desirable. _____
- E) Strive to improve my ability to carry on meaningful and enjoyable conversations with individuals of all ages and walks of life. _____
- F) Become knowledgeable of agriculture, agriculture education, and FFA. Keep myself up to date on current events and agricultural/education issues. _____

III. SERVICE TO FFA

- A) Be willing to commit the entire year to state officer activities. _____
- B) Be willing and able to travel in serving the Wisconsin Association of FFA. _____

- C) Consider FFA officer activities to be my primary responsibility. _____
- D) Become knowledgeable with the State FFA Program of Activities to be able to discuss it with chapter officers and others. _____
- E) Be dedicated and committed to FFA and the total program of agriculture education. _____
- F) Attendance and participation in the Base Camp Training, Check Point #1 Training, Officer D.C. Summit, and Checkpoint #2 Training for my year as a state officer. _____
- G) Full attendance and participation in the meetings of the State FFA Officers, Board of Directors, and State and Sectional FFA Events for the Section I serve. _____
- H) Full attendance and participation in all State FFA Leadership Conferences including Sectional Leadership Workshop, FIRE Conferences, 212 Conference, 360 Conference, EDGE, Half-Time Conference, etc. _____
- I) Leadership in arranging and conducting sectional chapter leadership meetings/activities with chapter officers in my area. _____
- J) Holding FFA leadership meetings with officers in local chapters in conducting a chapter visit at each chapter within my section. _____
- K) Speaking whenever available at FFA Banquets within the section upon invitation by the local chapter. _____
- L) Full attendance and participation in the annual Business-Industry Tour of State Officers. (Held during Sectional Leadership Workshops) _____
- M) Full attendance and participation at the National FFA Convention. _____
- N) Full attendance and participation at the Annual State FFA Convention. _____
- O) Attendance at all activities deemed appropriate an assigned by the Wisconsin Association of FFA and its state staff. _____
- P) Communicate on a daily basis with teammates and state staff through email. _____

IV. COOPERATION WITH OTHERS

- A) Work in harmony with fellow FFA officers, and not knowingly engage in conversations detrimental to other FFA members, officers, or adults. _____
- B) Serve as a member of the team always maintaining a cooperative attitude. _____
- C) Be willing to take and follow instructions as directed by those responsible for State Officers and State and National FFA programs. _____
- D) Notify State FFA Executive Director, Wisconsin Association, of FFA of all invitations other than those listed in section C above, (to avoid duplications of representation or other difficult situations). _____
- E) Communicate with the state office regularly. _____
- F) Careful memorization of parts assigned in state convention ceremonies and attention to other duties assigned. _____
- G) Responsible and timely reporting of activities conducted as a representative of the state FFA. _____

H) Cooperation with chapter FFA advisor and school district in completing duties listed on the attached sheet “Duties of a State Officer Advisor.” Communicate often with chapter _____ advisors.

I have read and understood the above points. I will carry out my responsibilities in accordance with these statements and understand that I can be removed from office by the Wisconsin Association of FFA State Board of Directors if I do not satisfactorily follow these established standards and policies.

REQUIRED SIGNATURES

ALL SIGNATURES LISTED BELOW ARE **REQUIRED** TO BE ELIGIBLE FOR THE STATE FFA OFFICE.

I _____ (print candidate name) have read the Wisconsin Association of FFA/ DPI Policies and the Statement of Commitment and Responsibility for State FFA Officer Candidates and verify that I will complete all the expected activities and abide by the expected code of a State FFA Officer if elected.

CANDIDATE SIGNATURE _____

I _____ (print parent/guardian name) have read the Wisconsin Association of FFA/ DPI Policies, Statement of Commitment and Responsibility for the State FFA Candidates, the Expected Activities for the State FFA Officers and Parent Information to verify that my son/daughter is able to complete the expected activities and abide by the expected code of a State FFA Officer if elected.

PARENT/GUARDIAN SIGNATURE _____

I _____ (print advisor name) have read the attached sheet, “Duties of a State FFA Officer’s Advisor” and verify that I will complete the expected activities if my candidate is elected. I have also reviewed with the State FFA Officer Candidate Statement of Commitment and Responsibility and Policies for State Officers and recommend the above candidate for the position as a State FFA Officer.

ADVISOR SIGNATURE _____

I _____ (print school administrator name) have read the information, “Duties of a State FFA Officer’s Advisor” and verify that my school district will cooperate in the completion of all the required activities that accompany having a State FFA Officer from our high school. I have also reviewed the information concerning the activities of a State FFA Officer and its policies and recommend the above candidate for the position as a State FFA Officer.

SCHOOL ADMINISTRATOR SIGNATURE _____

MEDIA CONTACTS

Your accomplishments in the Wisconsin Association FFA deserve publicity. Please fill out this form and return it with your application. Choose publications or stations that are most likely to use this information. Please remember that all publicity generated will greatly benefit agriculture education and FFA at the local, state, and national levels.

PERSONAL INFORMATION

Name: _____ Chapter: _____

Address: _____ City, State Zip: _____

LOCAL NEWSPAPER

Name: _____ Name: _____

Address: _____ Address: _____

City, State Zip: _____ City, State Zip: _____

News Director: _____ News Director: _____

LOCAL RADIO STATIONS

Name: _____ Name: _____

Address: _____ Address: _____

City, State Zip: _____ City, State Zip: _____

News Director: _____ News Director: _____

SCHOOL SUPERINTENDENT

Name: _____

School: _____

Address: _____

City, State Zip: _____

SCHOOL PRINCIPAL

Name: _____

School: _____

Address: _____

City, State Zip: _____