KANSAS HOSA
2023-2024 State Officer Candidate Application Procedure

When a HOSA member declares interest in applying for candidacy for a position on the Executive Council (State Officer position), the following criteria must be met:

1. The officer candidate will commit to the full term of office, which will be until the following election, regardless of the actual school time remaining before graduation.

2. The officer candidate must write the qualifying examination administered and scored by his/her local advisor and receive a minimum score of 70%.

3. The officer candidate must supply proof of a minimum grade point average of 2.5 to his/her local advisor.

4. The officer candidate must read, carefully consider, and complete the following required forms:

   - State Officer Candidate Commitment/Permission
   - State Officer Candidate Questionnaire
   - State Officer Candidate Registration Form
   - Kansas HOSA Code of Conduct

Prior to the election, ALL candidates should have completed the Written Examination, as well as the State Officer Commitment/Permission form, and be members in good standing of Kansas HOSA. No student will be recognized as a candidate for state office without the approval of their local advisor or designee.

Complete and return to Tina Goosz at tgoosz@kumc.edu and Tereasa Gilmore at tgilmore4@kumc.edu February 27, 2023.
KANSAS HOSA 2023-2024
STATE OFFICER CANDIDATE COMMITMENT/PERMISSION FORM

SECTION A: Candidate Commitment

Instructions: Please read carefully, discuss with your family, and obtain support for your candidacy from the following: your advisor, your school or department administrator. By signing this document, you and the aforementioned others agree to the following:

1. I will attend the current year’s Spring Leadership Conference as a candidate for election and give an acceptance speech to the audience. The office I may be elected to will be decided by the advisory team, and I will accept their decision.

2. I will have completed and passed the Kansas HOSA State Officer Written Examination.

3. In addition to this form, I will complete and submit for following forms required of state officer candidates, including:

   State Officer Candidate Registration
   State Officer Candidate Questionnaire
   State Officer Commitment/permission
   Kansas HOSA Code of Conduct

4. I will be a state and national dues paid HOSA member.

5. I will have met the criteria outlined in the Kansas HOSA State Officer Candidate Application Procedure.

6. I will become thoroughly familiar with the duties and responsibilities of my elected office and fulfill all responsibilities for the entire year.

7. My term of office begins on the day of election and continues until the next election, the following year.

8. I will serve with dignity, setting a professional example for all in Kansas HOSA, and will represent Kansas HOSA honorably. I will uphold the Kansas HOSA Code of Conduct at all times, and conduct myself in accordance with all applicable rules and regulations.

9. I will be committed to HOSA and promote HOSA’s goals and objectives in every way possible.

10. I will accept the role and responsibility as a member of the Kansas HOSA Executive Council.

11. The fulfillment of my responsibilities will require time, effort and personal sacrifice. I will work faithfully to assure the work of our state association is discharged in a timely manner.

Complete and return to Tina Goosz at tgoosz@kumc.edu and Tereasa Gilmore at tgilmore4@kumc.edu February 27, 2023.
12. I will attend all meetings, trainings, and conferences during the term of office and accept responsibilities as requested by the HOSA State Advisor including:

- All Executive Council meetings
- Joint CTSO State Officer Training (June)
- State Officer Planning Meeting (September)
- Fall Leadership Conference (October)
- State Officer Retreat and Officer Training (December, Kansas City)
- Citizenship Day (January, Topeka)
- Spring Leadership Conference (February or March, location TBD)
- International Leadership Conference (recommended)

**PLEASE NOTE:** All newly elected state officers will be REQUIRED to attend all State Officer trainings and the HOSA State Officer Retreat in Kansas City. Failure to do so may result in your dismissal from the State Officer team.

13. I will maintain a professional image and appearance in order to project a desirable image of HOSA.

14. I will wear official HOSA attire (see description on attached page) whenever representing Kansas HOSA in an official capacity.

15. I will represent my school, Advisor, program, state officer team, and State Advisor with the decorum required of such a position.

16. I will follow the Code of Conduct at all events. I will avoid places and actions that could raise questions regarding moral character or conduct.

17. I understand that use of alcohol, tobacco or illegal substances at any HOSA sponsored event will result in permanent expulsion from the Executive Council.

18. I will be able to work as a team player, avoiding any display of superiority.

19. I will treat all members of the organization equally and without discrimination.

20. I will resign office immediately if time commitments and expectations are not met (includes attendance, professional image, official dress, responsibility and conduct). If I am unable or unwilling to fulfill the responsibilities of my office, the State Advisor will appoint an alternate to serve in my place.

Signature ___________________________ Date__________________

Parent Signature ______________________ Date__________________

**Complete and return** to Tina Goosz at tgoosz@kumc.edu and Tereasa Gilmore at tgilmore4@kumc.edu **February 27, 2023.**
SECTION B: Chapter Advisor Commitment/Permission

1. I acknowledge that I have reviewed and discussed the foregoing State Officer Candidate responsibilities with my prospective officer candidate.

2. I further understand that as Chapter Advisor to a State Officer, I will need to assist the student with the responsibilities of the office to which he/she is elected.

3. I therefore, accept the responsibility for assisting the above-named prospective State Officer Candidate, so that he/she will be able to perform the outlined responsibilities to the best of his/her ability.

Signature of Chapter Advisor ____________________________ Date ____________

*The official uniform policy for Kansas HOSA State Officers is:

1. **Blazers for members - Males and Females.** A tailored navy blazer with HOSA emblem affixed over the heart.

2. **Shirt/blouse for female members.** A white tailored blouse or a short-sleeve, white jewel neck shell are acceptable. This is interpreted as: an open or closed neck. T-shirts or jewel necklines with lace, ruffle or full-edged collars are not acceptable.

3. **Shirt for male members.** A white, closed-neck, man-tailored dress shirt suitable for use with a tie.

4. **Accent for female members.** The maroon HOSA scarf no longer is a required part of the official uniform for females. However, maroon accent is optional as a scarf or bow tie.

5. **Accent for male members.** A solid navy or maroon man-tailored long tie.

6. **The official HOSA member or advisor pin is centered on the left lapel of the jacket.**

7. **Matching navy slacks for males, and slacks or skirts for females.** (Jeans and denim skirts are not considered appropriate.)

8. **Footwear** appropriate to the overall appearance of the uniform in solid navy, brown, or black. No open-toed shoes.

Complete and return to Tina Goosz at tgoosz@kumc.edu and Tereasa Gilmore at tgilmore4@kumc.edu February 27, 2023.
## Kansas HOSA 2023-2024 State Officer Candidate Questionnaire

Instructions: **Complete and return** to Tina Goosz at tgoosz@kumc.edu and Tereasa Gilmore at tgilmore4@kumc.edu.

Some or all of this information may be reproduced and provided to voting delegates or used for publication. Answers should be thorough, but briefly stated in complete sentences. Application should not exceed 2 pages.

### Candidates Name:  

### School & Chapter:  

1. Why do you want to be a state officer?
2. Current grade in school:
3. What are your qualifications for a position on the Executive Council?
4. Are you a local chapter officer this year? Yes ☐ No ☐ Office?
5. In what other school organizations are you presently active or were previously active?
6. What offices or leadership positions have you held in the above organizations? What awards or honors have you received as a result of participation in the named organizations?
7. In what community activities are you involved? How might this influence your candidacy or ability to carry out duties as a state officer?
8. What are your career goals?
9. List any other information you might wish to share.
10. Email communication is highly used with state officers. Are you able to check and respond to email in a timely manner? Yes ☐ No ☐

**Complete and return** to Tina Goosz at tgoosz@kumc.edu and Tereasa Gilmore at tgilmore4@kumc.edu  **February 27, 2023.**
Kansas HOSA
2023-2024 State Officer Candidate Registration

Instructions: Complete the following information and return to the Kansas HOSA State Office, Attn: Tina Goosz, 1501 South Joplin, 4th Floor Shirk Hall, Pittsburg, Kansas 66762.

Name: 

Chapter Advisor: 

School: 

School Telephone: 

Home Address: 

Home Telephone: 

Cellular Phone: 

Email Address: 

Clothing Size: 

Clothing choice: Circle One: t-shirt, polo, or pull-over

I have taken the Kansas HOSA State Officer qualifying examination with a resulting minimum score of 70% and my present grade average is 2.5 or above. I hereby request consideration as a candidate for an office in the State HOSA Association. This office will be from March 2023 until March 2024.

Candidate Signature _____________________________ Date ______________

Complete and return to Tina Goosz at tgoosz@kumc.edu and Tereasa Gilmore at tgilmore4@kumc.edu February 27, 2023.
National HOSA and Kansas HOSA Conduct Code

A good reputation enables members to take pride in their organization. HOSA members have an excellent reputation. Your conduct at any HOSA function should make a positive contribution to the reputation that has been established.

1. Officer behavior at all times should be such that it reflects credit to you, your school/college, your state and HOSA.
2. Officer conduct is the responsibility of the local chapter advisor. Officers shall keep their advisors informed of their (officer’s) activities and whereabouts at all times.
3. HOSA Conference name badges shall be worn at all times at HOSA functions.
4. Officers are expected to attend all general sessions and other scheduled conference activities. Please be prompt and show respect to those in the audience and on stage.
5. Advisors are to report any accidents, injuries or illnesses to their local or state advisor immediately.
6. Officers are expected to observe the designated curfew. (Curfew means being in your own room by the designated time.)
7. If an officer is responsible for stealing or vandalism, the student and his/her parents will be expected to pay any and all damages.
8. Officers attending the National Conference may not purchase, consume or be under the influence of alcohol or drugs at any time. Violators will be subject to stringent disciplinary action.
9. Smoking, vaping, or any appearance thereof is not allowed.
10. Officers who disregard the rules will be subject to disciplinary action and will be sent home at their own expense. Parents will be notified.
11. Any charges to the room will be the responsibility of the individual student and/or parents.
12. Officers are to abide by the NLC Attire Policy at all business sessions, general sessions, competitive events and other conference activities.

GENERAL SESSION PROTOCOL: Student delegates (advisors) should be enthusiastic at the general session but must not participate in excessive volume or motions that interfere with other’s ability to enjoy the session. Delegates must remain seated until the end of the session. States that do not adhere to general session protocol will be asked to send a representative to a special meeting of the National Executive Council.

REPRODUCTION OF PHOTOGRAPHS: As a delegate to the National Leadership Conference and Kansas HOSA conferences, I grant permission to make photographs, videotapes, broadcasts, and/or sound recordings, separately or in combination, available for reproduction for educational and promotional purposes by National HOSA and Kansas HOSA.

__ YES __ NO

I have read the Code of Conduct for HOSA conferences and agree to abide by these rules.

<table>
<thead>
<tr>
<th>Print Name of Parent/Guardian</th>
<th>Parent/Guardian Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Print Name of Student</th>
<th>Student Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

Complete and return to Tina Goosz at tgoosz@kumc.edu and Tereasa Gilmore at tgilmore4@kumc.edu  February 27, 2023.
Medical Liability Release Form

DIRECTIONS: Due to legal restrictions, it is necessary that all delegates, parents/guardians, guests and HOSA Advisors complete this form to be eligible to attend the 2023-2024 HOSA events. This form should be submitted to the State Advisor. In turn, the State Advisor will make a copy for his/her files and mail the original forms to National HOSA.

PLEASE TYPE OR PRINT ALL INFORMATION
Delegate Parent/Guardian
Name ___________________________ Name ___________________________
Home Address ________________________________ ________________________________
Student’s Physician: __________________________ Phone: __________________________
Physician’s Address: __________________________ ______________________________
Alternate Contact: __________________________
Telephone Number: Home: __________________________ Work: __________________________

Local Advisor: ___________________________ School Name: ___________________________
Student is covered by group or medical insurance: _____Yes _____No
If yes, complete the following information:

Name of insured: ___________________________ Insurance Company: ___________________________
Group #: ___________________________ Policy #: ___________________________
Please completely describe any medical condition which may recur or be a factor in medical treatment:
a. Allergies: ___________________________ e. Physical disability: ___________________________
c. Concussion: ___________________________ g. Diabetes: ___________________________
d. Heart/lung problems: ___________________________ h. Other (Be specific): ___________________________
If currently taking medication, please provide the following information:
Name of medication: ___________________________ Prescribing Physician/Phone Number: ___________________________

LIABILITY RELEASE. I certify that the information described above is accurate and complete to the best of my knowledge. I understand that each individual is responsible for his/her own insurance coverage during this trip. I hereby release the National HOSA Board of Directors, the National Staff, State and Local HOSA Associations and any designated individual in charge of the HOSA group or specific activity from any legal or financial responsibility with respect to my personal or my student/child’s participation in or contact with any known element associated with an activity including competitive events.

Complete and return to Tina Goosz at 1501 South Joplin, 4th Floor Shirk Hall, Pittsburg, Kansas 66762 by February 28, 2022.
Medical Liability Release Form

PARENT/GUARDIAN: Please check one of the following and sign your name.
☐ I give my permission for immediate medical treatment as required in the judgment of the attending physician. Notify me and/or any persons listed above as soon as possible.
☐ I do not give permission for medical treatment until I have been contacted.

Parent/Guardian’s Signature: ________________________________ Date ________________
(Applicable for delegates under the age of 18 and must be signed by the parent or legal guardian.)

Delegate’s Signature: ________________________________ Date ________________

Advisor’s Signature: ________________________________ Date ________________

Complete and return to Tina Goosz at 1501 South Joplin, 4th Floor Shirk Hall, Pittsburg, Kansas 66762 by February 28, 2022.
Kansas State HOSA State Officer Candidate
2022-2023 Written Examination Procedure

Following a HOSA student member’s declaration of interest in being a candidate for state office the student shall complete the official state examination and receive a qualifying score of at least 70% to be eligible for candidacy.

The examination is prepared by HOSA Inc and will be in an online format. A study guide is not available for this exam, however it is encouraged that students familiarize themselves with the HOSA handbook and the items listed below.

HOSA Handbook-Section A
- HOSA Core Values
- HOSA Creed
- HOSA Uniform
- HOSA Emblem
- History of HOSA
- National HOSA geographic regions
- HOSA Headquarters

HOSA Handbook-Section B
- Competitive Events

Kansas State HOSA Association-By-Laws
- Membership categories
- Voting Delegates
- Transaction of business
- Election of Officers

Robert’s Rules of Order-Part I
- Obtaining the floor at a business meeting
- Processing a motion
- Voting procedure for a motion

Robert’s Rules of Order-Part II
- Business Meeting Agenda

Complete and return to Seth Nutt at 1501 South Joplin, 4th Floor Shirk Hall, Pittsburg, Kansas 66762 by February 28, 2022.