**Lehi High School FCCLA Chapter Officer Contract**

If selected as a Lehi High School FCCLA Officer, I agree to carry out the following responsibilities:

Time Commitment

* Weekly officer meetings (Tuesdays)
* All chapter activities
* All STAR Event meetings
* Fall Leadership (September)
* Area Activity (November)
* Area Competition (February)
* Sweethearts (February)
* State Competition (April)
* Closing Banquet (May)

Code of Conduct Commitment

* Represent Lehi High School as well as Utah FCCLA.
* I understand that it is my responsibility to display a positive public image and promote the organization, both on and off campus.
* Fulfill the duties of my office by following through and completing assignments.
* Be an example of an effective leader.
* Follow the State CTSO Code of Conduct.
* Assist in planning and preparing programs and workshops for chapter meetings.
* Maintain a 2.5 GPA (each quarter).
* I will keep up with my school work and be responsible for the work I miss for FCCLA conferences or activities.

Professional Dress Commitment

I will follow the required dress code for all meetings as outlined below:

Chapter meetings: nice casual

Chapter Activities: FCCLA T-shirt and FCCLA sweater (if you have purchased one)

Official Meetings: official officer uniform

* White, black, or red collar button-up shirt or polo
* Black or khaki dress pants/skirt (not to be higher than 2” above the knee)
* Dress socks or nylons/tights
* Nice black shoes (no flip flops)
* FCCLA sweater (if you have purchased one)

Financial Commitment

Affiliation (State and National dues) $12

State Fall Leadership $45 (includes dinner, hotel, and transportation)

Area Activity $5 (if you want to ride the bus)

Area Competition $5

State Competition $45 (includes dinner, hotel, and transportation)

Please read and initial the following:

\_\_\_\_\_I understand that if selected, I need to pay the Affiliation, Fall Leadership, Area, and State costs or your school account will be charged.

\_\_\_\_\_I understand that I am responsible for any financial debts that are incurred.

\_\_\_\_\_I understand that if I resign from office, the written resignation must be signed by my parents/guardians and myself, and then submitted to a chapter advisor.

\_\_\_\_\_I understand that if I fail to fulfill my duties of this contract, my chapter advisors can initiate the process of my removal from office at any time, for any reason.

\_\_\_\_\_ I will attend the Sweethearts Dance and help with all the planning, decorating, and take-down required.

\_\_\_\_\_I will be at all required meetings. I will *discuss* with the advisors 48 hours in advance regarding the need to be absent.

I have read and understand the information required for being an officer and will carry out all responsibilities as outlined in this contract.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_

Officer Signature

I have reviewed this contract with my son/daughter. I will support my son/daughter in carrying out the above responsibilities and commitments.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature

**Warning Contract**

This contract is to set forth the specific obligations, expectations, and behaviors that are required as a Lehi High School FCCLA Officer. Up to this point, those obligations, expectations, and behaviors have not been fulfilled by the officer and this contract is made to rectify the situation. This contract is made because previous verbal attempts by the advisors to remedy the situation have failed.

The following are different reasons that an officer can be removed from office. The check marks next to the specific reasons indicate where the officer has not been fulfilling their duties as well as an explanation as to why they were marked by the advisors.

\_\_\_\_\_ I have missed multiple Tuesday officer meetings (with *or* without prior communication).

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\_\_\_\_\_ I have missed chapter activities (with *or* without prior communication).

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\_\_\_\_\_ I have not maintained the level of professionalism neccessary to represent Lehi High School FCCLA and Utah FCCLA adequately.

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\_\_\_\_\_ I have not maintained the proper dress code at meetings, activities, conferences, and/or other FCCLA functions.

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\_\_\_\_\_ I did not attend the Fall Leadership Conference in September.

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\_\_\_\_\_ I did not participate in the Area Leadership Conference in February.

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\_\_\_\_\_ I did not participate in the State Leadership Conference in April.

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\_\_\_\_\_ I did not help with the planning, decorating, and/or take down of the Sweethearts Dance in February.

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We have completed this form accurately and truthfully. We are of the same mind regarding the officer and what has transpired. We want the see officer to continue as an officer of Lehi FCCLA, but only if corrective measures have been taken.

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Michelle Stott

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_

Valerie Harrison

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_

Rachel Hughes

I have read the contract and understand why it is that I have been given this contract. This contract consititutes the last chance for the me to remedy the situation(s). I understand that if I break this contract at all, that it will result in me being removed as an officer of Lehi High School FCCLA.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_

Officer Signature

I have reviewed this contract with my son/daughter. I will support my son/daughter in carrying out the above responsibilities and commitments that will enable them to continue being a Lehi High School FCCLA officer.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature