

**APPLICATION**  
for  
**2018 – 2019**  
**PENN HOSA EXECUTIVE COUNCIL**



**PENN HOSA – FUTURE HEALTH PROFESSIONALS**

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## Checklist for State Officer Application

Candidate's Name: \_\_\_\_\_

School: \_\_\_\_\_

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

Preferred Office: \_\_\_\_\_

**NOTE:** The Nominating Committee reserves the right to change any candidate from the preferred office originally selected with the candidate's consent thus affording the committee the ability to slate the candidate for an office on the Executive Council.

The following items **MUST** be included as part of the State Officer Application Packet and postmarked prior to **February 9, 2018**:

1. \_\_\_\_\_ Checklist for State Officer Application
2. \_\_\_\_\_ State Officer Candidate Application
3. \_\_\_\_\_ Advisor/Officer Candidate Memorandum of Understanding with required signatures of support
4. \_\_\_\_\_ Official Transcript of Grades (in sealed and signed envelope)
5. \_\_\_\_\_ Officer Candidate Essay
6. \_\_\_\_\_ State Officer Permission Form
7. \_\_\_\_\_ PENN HOSA State Officer Code of Conduct
8. \_\_\_\_\_ PENN HOSA State Officer Medical Liability Release Form
9. \_\_\_\_\_ Copy of chapter affiliation form with candidate's name highlighted (verifies candidate is a HOSA member)

This checklist is to accompany the completed state officer application:

- Check off completed items as you assemble them for the application.
- Place the checklist in the front of the completed application packer prior to mailing.
- Make copies of all forms for yourself, the candidate, and advisor.
- The State Officer Coordinator will review all application for completeness. Any missing information will result in deduction of points from the grading rubric. The rubric can be found at the end of the application.
- **Advisor:** Email the State Officer Coordinator as notification that an application packet was mailed to his attention. Please include the applicant's name, school, chapter name, email address, and preferred office.

The State Officer Application Packet contains some very important information. Please carefully read and review all information prior to completing the necessary forms. Once you have thoroughly reviewed the packet and completed all necessary forms, please submit them by **February 9, 2018** to:

Marcus Henderson  
PENN HOSA State Officer Coordinator  
7950 Henry Avenue APT 15C  
Philadelphia, PA 19128

## **Procedure for Becoming a Member of the PENN HOSA Executive Council (State Officer)**

1. Only two (2) secondary student members in a local chapter may run for an office.
2. Two (2) secondary student members from the same chapter may not be a candidate for the same office.
3. It is to the candidate's advantage to have had local officer experience, although it is not required.
4. Any secondary student member who wants to be considered as a candidate for a PENN HOSA state office must:
  - a. Complete and sign the State Officer Candidate Application.
  - b. Sign and obtain required signatures for the Memorandum of Understanding.
  - c. Submit an official school transcript in a sealed and signed envelope.
  - d. Write an essay.
  - e. Return the completed Permission, Code of Conduct, and Medical Liability Release Forms.
  - f. Provide verification of HOSA membership.
  - g. Meet the required imposed date of **February 9, 2018** to have all required information to the State Officer Coordinator.
  - h. **NEW: Take an officer candidate test online prior to the State Leadership Conference (SLC).**
  - i. Be present at the Officer Candidate Screening by the Nominating Committee to 1) be interviewed, 2) present an elevator speech on how to market HOSA, and 3) recite the HOSA Creed.
  - j. Give a candidate speech at the SLC Opening Session.
5. The Nominating Committee and the State Officer Coordinator shall have the authority to change the candidates from the preferred office listed on the application with the candidate's consent. The candidate may be asked to "run" for an office not originally selected. The candidate may also be asked to change office in the event there is no other choice.
  - a. Based on the submitted application, interview, elevator speech, and written test results, a slate for officer candidates will be prepared for presentation to the House of Delegates.
6. The offices available for candidacy are:
  - a. President
  - b. Vice-president
  - c. Regional Vice Presidents (preferably from a chapter in stated Region; check PENN HOSA Directory for this information)
    - i. Central Region

- ii. Eastern Region
- iii. Western Region
- d. Secretary
- e. Historian

#### **7. Competition**

- a. **As an officer candidate and officer:** you may **not** compete in any **competitive event** due to your involvement at the State Leadership Conference (SLC).
  - i. Exception: Participation in the recognition event, Barbara James Service Award, is strongly encouraged.

#### **8. Candidate Speech:**

- a. Each candidate will be asked to present a 2-3 minute speech at the Opening Session of the SLC. Each candidate will be stopped at the end of three minutes whether or not the speech has been presented in its entirety.
  - i. The speech should:
    1. Be biographical.
    2. Share your leadership qualities and experiences (these should be pertinent to any office held since the Nominating Committee may slate you in an office other than the one for which you are applying).
    3. Include a commitment to serve PENN HOSA as a State officer.
    4. Not include props, posters or costumes.
- b. Each candidate will be asked to recite his/her application essay to the Nominating Committee on Day 2 in the House of Delegates Business Session.

#### **9. Campaigning at SLC:**

- a. Campaigning for office may take place following the House of Delegates orientation and Candidate Screening on Day 1.
- b. Campaign materials may be distributed but not displayed on hotel structures.
- c. Verbal campaigning is encouraged.
- d. Cost of campaigning materials is not to exceed \$50.00.
- e. Campaigning materials may be distributed on the first night of the conference prior to but not during the Bingo Bash.

#### **10. Election:**

- a. The election will take place during the House of Delegates' Business Session where delegates elect the officers by ballot.
- b. The winning candidate must be declared by majority vote (51%).

#### **11. Installation of Officers:**

- a. Officers will be installed at the Recognition Session on Day 2 of the SLC and will assume all responsibilities upon the conclusion of the SLC.

## 12. Attire

- a. **Officer Candidate: MUST** be in official HOSA uniform **or** navy blue suit when participating in the delegate sessions and general sessions at the SLC.
- b. Since a knee length skirt is part of the official HOSA uniform, it is recommended that female candidates consider this when preparing for candidacy.
- c. All candidates are required to:
  - i. Wear an oxford style shirt.
  - ii. If not wearing an official HOSA uniform then candidate must have an official HOSA patch purchased from MARKET PLACE stitched loosely to his/her navy blue suit; patch may not be pinned to suit jacket.
  - iii. Wear an official gender appropriate HOSA tie purchased from MARKET PLACE.
  - iv. Noncompliance of stated acceptable attire will prevent the candidate from participating at SLC.
- d. **An official HOSA Uniform is required of all elected State Officers and MUST be purchased by May 1st from Market Place (Awards Unlimited) the official HOSA supply company.** Refer to PENN HOSA SLC Dress Code on the State website at [www.pahosa.org](http://www.pahosa.org) for details about the Official HOSA uniform or to the national website at [www.hosa.org](http://www.hosa.org) .

# Study Guide for Officer Test

Knowing information about the listed areas will help the officer candidate prepare for the written test to be taken as part of the candidacy process at the PENN HOSA SLC. By no means is it an all-inclusive list of questions that could be on the test. PENN HOSA-Future Health Professionals wishes you the best as you prepare for the test!

## References for Study Guide:

Robert's Rules of Order  
Sections A and C of the HOSA Handbook  
HOSA Competitive Events

## Major Divisions of Study:

1. HOSA
  - a. Location of HOSA office
  - b. Positions of HOSA Executive Council
  - c. HOSA Creed
  - d. HOSA Motto
  
2. PENN HOSA
  - a. Positions of Executive Council (state officers)
  - b. Positions of PENN HOSA, Inc. Board members
  - c. Date PENN HOSA was chartered
  - d. Duties of the Executive Council Members
  
3. PARLIAMENTARY PROCEDURES
  - a. Commonly used motions
  - b. Title of formal rules used for meetings
  - c. Names of official committees for PENN HOSA
  - d. Definition of minutes
  - e. Duties of delegates
  - f. Parliamentary terms
    - i. Adjourn
    - ii. Convene
    - iii. Move
    - iv. Question
    - v. Lay on the table

Sample test questions are included on the following page for your reference. The answers are not provided so this will really test your knowledge!

### **SAMPLE TEST QUESTIONS:**

1. In which state is HOSA headquarters located?
  - a. Florida
  - b. California
  - c. Tennessee
  - d. Texas
2. What body represents the local chapter members in balloting on questions of business or selection of officers?
  - a. Voting Delegates
  - b. Local Advisors
  - c. State Advisors
  - d. State Officers
3. The minimum affirmative vote necessary to adopt or amend special rules of order that are separate from the bylaws is
  - a. a majority of those present.
  - b. a majority of the entire membership with notice.
  - c. two-thirds without previous notice.
  - d. two-thirds with previous notice.
4. Motions that relate in different ways to the pending business or to business otherwise at hand are called
  - a. main motions.
  - b. privileged motions.
  - c. incidental motions.
  - d. subsidiary motions.
5. Which of the following is a team event?
  - a. Barbara James Service Award
  - b. Medical Assisting
  - c. Sports Medicine
  - d. Health Career Display
6. The motion to limit debate may be applied:
  - a. only to the immediately pending question.
  - b. to an entire series of debatable questions.
  - c. to the motion to lay on the table.
  - d. to the privilege motion to recess.
7. After members make motions, they should:
  - a. debate the motion.
  - b. remain standing and wait for permission to debate.
  - c. resume their seats.
  - d. sit and wait for another member to ask a question so that debate may proceed.
8. The PENN HOSA State Advisor is:
  - a. Esther Brown
  - b. Helen Heidelbaugh
  - c. Janet Nelson
  - d. Rosemarie Dunkelberger



## Duties of the Executive Council Members

Pennsylvania HOSA officers shall make themselves available, as necessary, in promoting the general welfare of the organization and in assisting to increase membership.

- A. **PRESIDENT:** It shall be the duty of the president to:
1. Preside at the State Conference and all PENN HOSA-Future Health Professionals officer meetings.
  2. Serve as an ex-officio member of all standing committees.
  3. Serve as a Delegate-At-Large at the State Leadership Conference.
  4. Serve PENN HOSA-Future Health Professionals in any capacity as requested by the Executive Director/State Advisor and the State Officer Coordinator.
  5. Attend PENN HOSA Inc. Board of Directors Meetings or appoint a designee
- B. **VICE-PRESIDENT:** It shall be the duty of the vice-president to:
1. Preside in the president's absence.
  2. Succeed the president if the office of president is vacated.
  3. Serve PENN HOSA-Future Health Professionals in any capacity as requested by the Executive Director/State Advisor, State Officer Coordinator and/or the President.
  4. Serve on committees as assigned.
  5. Serve as a Delegate-At-Large at the State Leadership Conference.
- C. **SECRETARY:** It shall be the duty of the secretary to:
1. Take the roll call at all business meetings and report quorum status.
  2. Record the proceedings of all meetings and to file all such records with the PENN HOSA-Future Health Professionals Executive Director/State Advisor and the State Officer Coordinator within **ten (10) days**.
  3. Assist the President in planning agendas for meetings if called upon to do so.
  4. Serve PENN HOSA-Future Health Professionals in any capacity as requested by the Executive Director/State Advisor, State Officer Coordinator and/or President.
  5. Serve on committees as assigned.
  6. Serve as Delegate-At-Large at the State Leadership Conference.
- D. **HISTORIAN:** It shall be the duty of the historian to:
1. Be responsible for the keeping of records and other materials of historic importance to PENN HOSA-Future Health Professionals.
  2. Serve PENN HOSA-Future Health Professionals in any capacity as requested by the Executive Director/State Advisor, State Officer Coordinator and/or President.
  3. Serve on committees as assigned.
  4. Serve as Delegate-At-Large at the State Leadership Conference.
- E. **REGIONAL VICE-PRESIDENTS:** It shall be the duty of the regional vice-presidents to:
1. Promote growth and development of PENN HOSA-Future Health Professionals within their region.
  2. Serve PENN HOSA-Future Health Professionals in any capacity as requested by the PENN HOSA Executive Director/State Advisor, State Officer Coordinator and/or President.
  3. Serve on committees as assigned.
  4. Serve as Delegate-At-Large at the State Leadership Conference.

## Directions for the State Officer Candidate Application

**APPLICATION DEADLINE:** On or before **February 9, 2018**

1. Thoroughly read each question on the application before answering it.
2. Print and photocopy the original application if an additional one is needed.
3. Accurately and thoroughly complete all parts of the application process.  
**\*Make copies of all papers for your personal records.**
4. Two (2) options for completing the application:
  - a. Option #1:
    - i. Print the application
    - ii. Neatly and clearly print your responses in **BLACK** ink only
    - iii. Mail form to address listed on the checklist with this application (p.3)
  - b. Option #2:
    - i. Type your responses directly on this form
    - ii. To type on the line:
      1. Click the underline button after placing your cursor at the beginning of the line where you want to type information
      2. Type your response
        - a. Hit the tab key on the keyboard if more space is needed to complete your response
        - b. If the line extends to the next line on the application as you type Press the “delete key” until the line returns to the correct space
        - c. When finished with each line, turn off the underline button
        - d. Proceed to the next line
        - e. Mail form to the address listed on the checklist with this application
5. Proof read your application before submitting it.
6. \*\*\*Include a recent transcript in a sealed and signed envelope with your completed application.
7. Remember to check your application for completeness by using the checklist with this application.

# State Officer Candidate Application

Candidate's Name: \_\_\_\_\_

Current Grade (circle one):      10      11      12

Preferred Office: \_\_\_\_\_

**NOTE:** The Nominating Committee has the authority to change candidates from the office originally selected with the candidate's consent thus affording the committee the authority to slate the candidates for an office on the Executive Committee.

County \_\_\_\_\_ Region \_\_\_\_\_  
(Check PENN HOSA Directory for this information)

Candidate's Home Address: \_\_\_\_\_

Street

City

State

Zip

Candidate's Home Phone : ( \_\_\_\_\_ ) \_\_\_\_\_

Candidate's Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Candidate's Email Address: \_\_\_\_\_

Candidate's Career & Technical School: \_\_\_\_\_

**Or** High School (list High School only if HOSA chapter is located in a high school setting)

School Address: \_\_\_\_\_

Street

City

State

Zip

School Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Fax:( \_\_\_\_\_ ) \_\_\_\_\_

Name of Technical Program (only if enrolled in a CTC) \_\_\_\_\_

Advisor's Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Advisor's School phone Number (incl. extension): ( \_\_\_\_\_ ) \_\_\_\_\_

Advisor's Cell Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Local offices and year held:

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List major activities and organizations in which you are a member or have actively participated:

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State three realistic goals which, if elected, you feel you can accomplish for PENN HOSA-Future Health Professionals:

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I submit that the information in this application is factual and that I have completed this application to the best of my ability. If elected to a position on the PENN HOSA Executive Council, I will diligently strive to meet my proposed goals.

\_\_\_\_\_

Printed Candidate's Name

\_\_\_\_\_

Candidate's Signature

\_\_\_\_\_

Date

## Memorandum of Understanding

Please review the following items prior to submitting this form along with other required materials to the State Officer Coordinator. A signature is required from the student, the parent/guardian, the advisor, the principal and an administrator.

Serving as a PENN HOSA-Future Health Professionals Officer demands a commitment to the organization. Therefore, it is vital that all members who aspire to become HOSA officers are highly qualified, able and willing to assume the responsibilities required of all HOSA officers.

### **EXPECTATIONS OF A PENN HOSA STATE OFFICER:**

1. Be committed to HOSA-Future Health Professionals and promote HOSA's goals and objectives in every way possible.
2. Be enrolled in a regularly scheduled health related program/course of study during my term of office.
3. Be a paid state and national HOSA member.
4. Complete the term of office, accepting this honor as a responsibility to the local program and to PENN HOSA-Future Health Professionals.
5. Know the duties and functions of the office for which selected and fulfill all responsibilities until the next State Leadership Conference. If selected for the office of secretary, the minutes of the meetings must be submitted within 2 weeks after each meeting. This is a combined responsibility of both the officer and his/her local advisor.
6. Accept the role and responsibility as a member of the PENN HOSA Executive Council as written in the PENN HOSA-Future Health Professionals student Bylaws.
7. Understand and assure that by May 1st the official HOSA uniform will be purchased from the MARKET PLACE Catalog and paid for by the elected officer or his/her chapter. Female officer: blazer, skirt and female accent. Male officer: blazer, slacks and male tie. The required two (2) Oxford style shirts for each officer may be purchased locally.
8. Project a positive and professional image of HOSA-Future Health Professionals at all times.
9. Meet established deadlines for all assignments and Advisor edited communications to chapters, State Officer Coordinator and PENN HOSA State Advisor.
10. Represent the local school, advisor, program, state officer team, state officer coordinator, State Advisor, PENN HOSA and the Pennsylvania Department of Career and Technical Education with the decorum required of such a position.
11. Maintain a professional image and good grooming in order to project a desirable image of the HOSA organization.
12. Attend all meetings, trainings, workshops and conferences during the term of office including a Summer Leadership Training August 14-16, 2018 and accept responsibilities as requested by the State Officer Coordinator and PENN HOSA State Advisor. PENN HOSA-Future Health Professionals will cover officer expenses at the August workshop. Length of meetings may extend beyond normal school hours.
13. Understand that *“Any officer not attending the Summer Leadership Workshop will forfeit the office. Crisis situations will be handled individually by the Executive Committee of PENN HOSA, Inc., Board of Directors and/or the PENN HOSA Executive Director/State Advisor.”* (Statement taken from student Bylaws for

*Pennsylvania HOSA.*)

14. Attend the State Officer Leadership Training Workshop that is always scheduled and implemented the three days prior to the start of the PENN HOSA State Leadership Conference (SLC).
15. Understand that PENN HOSA-Future Health Professionals will support SLC expenses and that all other expenses of travel, food and accommodations are the responsibility of the officers' school district.
16. Attend the HOSA International Leadership Conference (ILC), if available, and at the expense of the officer's local HOSA chapter/school.
17. Be willing to spend the necessary time and travel during the term of office.
18. Travel to all meetings, trainings, workshops and conferences during the term of office. Coordination of travel arrangements becomes the full responsibility of the officer and local HOSA Advisor.
19. Avoid places and actions that could raise questions regarding moral character or conduct.
20. Use of alcohol, tobacco or illegal substances at any school, HOSA or Pennsylvania Department of Career and Technical Education sponsored event will result in permanent expulsion from the Executive Council.
21. Be able to work as a team player, avoiding any display of superiority.
22. Treat all members of the organization equally and without discrimination.
23. Resign office immediately if at any time commitments and expectations are not met (includes attendance, professional image, official dress, responsibility and conduct).
24. Follow the Code of Conduct at all events.

#### **EXPECTATIONS OF THE LOCAL HOSA ADVISOR:**

1. Insure that the state officer follows his/her expectations listed above.
2. Assist and assure that by May 1 the official HOSA uniform will be purchased from the MARKET PLACE Catalog and paid for by the elected officer or his/her chapter.
3. Accept responsibilities for your officer as requested by the State Officer Coordinator/State Advisor.
4. Coordination of travel arrangements becomes the full responsibility of the officer and local HOSA Advisor. PENN HOSA is not responsible for making travel arrangements.
5. Assist your officer with required reports to the State Officer Coordinator and the State Advisor by assuring that editing of the communications has been done and making certain that imposed deadlines are met.
6. Attend Spring Board of Directors Meeting/Training, Summer Leadership Training August 14-16, 2018, Annual Advisors' Workshop, Pre-Conference Training, and Annual State Leadership Conference. Attendance may be required at other meetings/trainings (e.g. November, December, and February) upon request by the State Officer Coordinator or Executive Director/State Advisor.
7. Assist the state officer at school, workshops and conferences and work with the State Officer Coordinator and State Advisor at these activities.
8. Attend the State Officer Leadership Training with your officer that is always scheduled and implemented the three (3) days prior to the start of the PENN HOSA SLC. Justification for your attendance at this workshop is included in this packet.
9. Complete duties at the PENN HOSA SLC as assigned by the State Officer Coordinator and/or Executive Director/State Advisor.

10. Understand that because of extensive responsibilities with state officers at the PENN HOSA SLC, it will be necessary to obtain assistance to help with other local chapter members attending the SLC.
11. Serve as the state officer's positive role model with dress, language, habits, assistance, ethics, etc.
12. Understand that there is no extra compensation to serve in this position.
13. Understand that financial support of expenses incurred while attending activities with the officer become your school and/or personal responsibility.
14. Assist the State Officer Coordinator and State Advisor as needed throughout the officer's term.

**Officer Candidate Statement of Support**

I understand all of the expectations required of a PENN HOSA State Executive Council Member and I am committed to this responsibility.

\_\_\_\_\_  
Candidate Signature

\_\_\_\_\_  
Date

**Local Advisor Statement of Support**

It is my belief that this candidate will fulfill the responsibilities of a HOSA officer and I highly recommend this applicant. If he/she is elected, I shall assist in any assigned duties. I shall be present at all meetings/trainings/conferences, including a **Summer Leadership Training August 14-16, 2018** as required. I understand all of the expectations required of a PENN HOSA State Executive Council Member local Advisor and I am committed to this responsibility.

\_\_\_\_\_  
Advisor Signature

\_\_\_\_\_  
Date

**Parent (Guardian) Statement of Support**

I approve of my son/daughter applying for a HOSA office and if elected, agree that he/she will be able to spend the time necessary to carry out the duties of a PENN HOSA officer, including attendance at a **Summer Leadership Training August 14-16, 2018**.

\_\_\_\_\_  
Parent (Guardian) Signature

\_\_\_\_\_  
Date

**Administrative Statement of Support**

As a representative official of the school I understand that if the candidate is elected to serve as an officer on the PENN HOSA Executive Council, we will support and assist him/her and his/her HOSA local Advisor in successfully fulfilling the obligations in the Memorandum of Understanding including but not limited to travel and financial support as the need arises. As a school representative I understand all of the expectations required of a PENN HOSA State Executive Council Member and the local advisor and I am committed to this responsibility.

\_\_\_\_\_  
Home School Administrator Signature      Date

\_\_\_\_\_  
CTC Administrator Signature                      Date

**NOTE:** If an officer candidate attends a home school **and** a career and technical school (CTC) a signature from both administrators **MUST** be obtained.

## Justification of Advisor's Participation at the PENN HOSA SLC

To: Advisors of PENN HOSA State Officers

From: Marcus Henderson, State Officer Coordinator  
Janet E. Nelson, PENN HOSA Executive Director/State Advisor

Subject: Justification for Pre-conference Workshop

As stated in the Memorandum of Understanding 1) the PENN HOSA Executive Council Member's local advisor is to attend the State Officer Leadership Training which is always scheduled and implemented the three days prior to the start of the PENN HOSA State Leadership Conference (SLC), 2) that because of extensive responsibilities with state officers at the PENN HOSA SLC, it will be necessary to obtain assistance to help with other local chapter members attending the SLC, and 3) that the officer must travel with his/her HOSA local Advisor or school appointed representative. Parents/Guardians and your school Administrative official representatives received and signed the Memorandum of Understanding form offering support to the student candidate and his/her local chapter advisor.

During these three (3) preconference days your assistance will be needed to work with your officer in helping to prepare him/her for his/her role at the State Leadership Conference. Some of the agenda items that you will be assisting your officers to practice include:

- ❖ Public Speaking
- ❖ Evening General Sessions and the Grand Awards Session
- ❖ Committee Meetings (Bylaws, Leadership Skills, Public Relations, Nominating, and Ceremonial)
- ❖ House of Delegates Assembly
- ❖ Recognition Program
- ❖ Installation of New Officers
- ❖ Workshop for Voting Delegates
- ❖ Officers' Reports at House of Delegates
- ❖ Interviewing candidates for Office
- ❖ Conducting candidate tests
- ❖ Greeting conference attendees and Judges

You will also be assigned other duties related to the Conference operation, either by the State Officer Coordinator or the Executive Director/State Advisor.

Your officer(s) will be practicing the above mentioned duties during the three days prior to the actual Conference dates and we are asking that you assist where needed and work with your officer to insure he/she is prepared for and comfortable with his/her duties. It is much work, but together we can accomplish all of it. Make certain your officer(s) follow the dress code established by the State Officer Coordinator and that in particular he/she has a minimum of two (2) white oxford style shirts for the conference during the term of office.

PENN HOSA will financially support the officer's SLC expenses for the pre-conference workshop and for the actual SLC dates. As the officer's advisor you are responsible for your own expenses incurred during this time. Thank you for your continuing support of your officer and PENN HOSA!



## **State Officer Candidate Essay**

### **Essay Topic:**

“What does a leader of HOSA-Future Health Professionals look like to you?”

**Length:** No more than one typed page

**Requirements:** Times Roman Font #12; 1” borders; double spaced

**MUST** be submitted with the application

## State Officer Permission Form

*The duties and responsibilities of serving as a PENN HOSA State Officer involve attendance at Executive Council meetings, trainings and conferences as well as travel to those activities. Each officer is responsible for making his or her own travel arrangements in conjunction with their local chapter advisor.*

**PLEASE READ THIS INFORMATION CAREFULLY, OBTAIN THE APPROPRIATE SIGNATURES, AND RETURN BY THE PUBLISHED DATE TO Marcus Henderson, PENN HOSA State Officer Coordinator.**

*I understand that this permission form is effective from the time I am elected to a state office at the PENN HOSA State Leadership Conference until my term ends at the following year's PENN HOSA State Leadership Conference.*

*I understand that travel arrangements are the full responsibility of the officer and local HOSA advisor.*

*I understand that each individual is responsible for his or her insurance coverage during any trip that involves PENN HOSA-Future Health Professionals.*

*I hereby release the National HOSA Board of Directors, the State HOSA Board of Directors, the national and state HOSA staff, the state and local HOSA organizations, 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 student's/child's participation in or contact with any known element associated with a HOSA activity.*

*I understand that the possession and/or use of any drugs, alcohol, or tobacco products, or failure to follow instructions from the PENN HOSA State Officer Coordinator and/or the PENN HOSA Executive Director/State Advisor, or any behavior that causes any risk to the safety of others, is cause for immediate removal from office.*

*I grant permission for the taking of photographs, videotapes, broadcasts, and/or sound recordings, separately or in combination, to be available for reproduction for educational and promotional purposes by PENN HOSA.*

I **give** permission for my son or daughter to drive to all PENN HOSA activities during his/her term of office.

I **do not give** permission for my son or daughter to drive to all PENN HOSA activities during his/her term of office.

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Candidate Signature

\_\_\_\_\_  
Date



# Medical Liability Release Form

Candidate's Name \_\_\_\_\_

Parent's/Guardian's Name \_\_\_\_\_

Home Address \_\_\_\_\_

Parent/Guardian/Telephone: (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
Home Work Cell

Candidate's Physician: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Physician's Address: \_\_\_\_\_

Alternate Contact: \_\_\_\_\_

\_\_\_\_\_  
Name and Relationship to Applicant  
(\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
Home Work Cell

School Name: \_\_\_\_\_

Address: \_\_\_\_\_

Administrator's Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Candidate 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 occur or be a factor in medical treatment:

a. Allergy: \_\_\_\_\_

b. Physical Handicap: \_\_\_\_\_

c. Convulsions: \_\_\_\_\_

d. Medicine Reactions: \_\_\_\_\_

e. Blackouts: \_\_\_\_\_

f. Disease of Any Kind: \_\_\_\_\_

g. Heart & Lung Problems: \_\_\_\_\_

h. Other (Be specific): \_\_\_\_\_

If currently taking medication, please provide the following information:

Name of Medication: \_\_\_\_\_

Prescribing Physician and Phone: \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

**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. I hereby release the PENN HOSA Board of Directors, the State Advisor, PENN HOSA, Inc., National HOSA Staff, and Local HOSA advisors, local school staff, and any designated individual or group 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.

**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 \_\_\_\_\_

Candidate's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date \_\_\_\_\_

**APPENDIX A**  
**PENN HOSA STATE OFFICERS SCHEDULE 2018-2019**

<b>DATE</b>	<b>EVENT</b>	<b>LOCATION</b>
May 2018 TBD	PENN HOSA Inc., Board Meeting/Officer Leadership Training	TBD
August 14-16, 2018	Summer Leadership Training	Lancaster HOST, Lancaster, PA
October 5, 2018	Officer Leadership Training/Advisor Workshop	Lancaster HOST, Lancaster, PA
November 2018 TBD	PENN HOSA Inc., Board Meeting (President or designee only)	TBD
December 7, 2018	Officer Leadership Training	TBD
December 14, 2018	Snow Date	TBD
February 1, 2019	Officer Leadership Training	TBD
February 15, 2019	Snow Date	TBD
March 3-5, 2019	Officer Pre-SLC Leadership Training	Lancaster HOST, Lancaster, PA
March 6-8, 2019	PENN HOSA 40 <sup>th</sup> SLC	Lancaster HOST, Lancaster, PA

- Please have the official HOSA uniform by May 1<sup>st</sup>. Officers' pictures will be taken at the May PENN HOSA, Inc. Board Meeting.
- Purchase two (2) white oxford button-down white shirts, and for females, the burgundy accent and the male, the burgundy tie.
- HOSA Attire is required for all meetings and training sessions.
- HOSA Work Uniform – Khaki pants and HOSA polo shirt needed for Summer Workshop, ILC, and PENN HOSA SLC.
- PENN HOSA will purchase the polo for each officer.
- Monthly phone/video conference calls to be determined by newly elected State Officers at the May Officer Leadership Training with first meeting in June.

**Contact Information:**

- State Officer Coordinator – Marcus Henderson
  - Cell Phone – (484) 522-9248
  - Email Address – [marcushendersonhosa@gmail.com](mailto:marcushendersonhosa@gmail.com)

APPENDIX B

**State Officer Candidate Qualifying Form**

Candidate Name\_\_\_\_\_

Slated Office\_\_\_\_\_

**Application**

More than 2 missing components	1 or less missing components	100% completion
1 Point	2 Points	3 Points
Points Earned _____		

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**Test**

0-50 %	51-69%	70% and above	
1 Point	2 Points	3 Points	Points Earned_____

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**Candidate screening**

0-9	10-18	19-27	
1 Point	2 Points	3 Points	Points Earned_____

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**Vote**

50% or less	51% and above
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**TOTAL SCORE**\_\_\_\_\_

**The Application, Test, and Candidate screening points must score a minimum of 70% in order to become slated for an office. Vote must be 51% and above to be voted into the slated office.**

APPENDIX C  
**State Officer Interview Rating Form**

Candidate Name \_\_\_\_\_

Instructions: The Nominating Committee will rate the candidates on their responses according to the following scale:

3 = excellent

2 = average

1 = fair/needs improvement

**Criteria**

**Appearance:**

Grooming	3	2	1
Posture	3	2	1
Appropriate attire	3	2	1

**Oral Interview:**

Knows the HOSA Creed	3	2	1
Demonstrates enthusiasm	3	2	1
Quick/thorough response to questions	3	2	1

**Communication Techniques :**

Quality of voice, pronunciation	3	2	1
Power of expression	3	2	1
Eye contact with interviewer	3	2	1

**COMMENTS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Interviewer \_\_\_\_\_ Date \_\_\_\_\_

**TOTAL SCORE** \_\_\_\_\_