**South Carolina FFA Association**

**2024 Nominating Committee Form**

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**Applications must be submitted by the Spring Regional Teacher Meeting**

**Student Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Chapter Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Region \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I nominate the above-named student to be considered for the state FFA officer nominating

committee for the 2024 State FFA Convention. In so doing, I acknowledge the below statements to be true and accurate and will be abided by my nominee.

1. The nominee is an active member of our local chapter and has paid State and National dues.
2. The nominee is currently a high school sophomore or above.
3. The nominee has been an FFA member for two years.

(Except for Career Technology Center members.)

1. The nominee will be able to attend the state FFA convention beginning on Sunday, June 16, 2024, through the closing session.
2. The nominee will have enough official dress to wear each day of the convention.
3. The nominee or chapter will pay for all meals and travel expenses.

**Teacher's Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I agree to observe and follow the below guidelines, if selected to serve on the State FFA Officer nominating committee for the 2024 State FFA Convention.

1. I will follow the leadership of the nominating committee coordinator and other assistants.

2. I will attend the state FFA convention beginning on Sunday, June 16, 2024, through the closing session.

3. I will have enough official dress to wear each day of the convention.

4. I will stay in the housing assigned by the State FFA Association.

5. I will or my chapter will pay for all meals and travel expenses.

**6. Attached a statement explaining why you would like to serve on the Nominating Committee.**

**(100 - 200 words in length)**

**Nominees must be from chapters that do not have a state officer candidate!**

**Nominee's Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**