



**State Officer Candidate  
Application Packet  
2020-21**

## State Officer Requirements

**Communication:** All electronic communication will be done by email, copied to the State Advisor. All communication should be respectful at all times.

**Transportation:** The State Officer is responsible for getting him/herself to all meetings and State Conferences.

**Plan of Work:** Will be consistent with State goals as directed by the State Advisor. The President may delegate responsibilities to each State Officer and the plan must include specific dates for task completion.

**Electronic Devices:** Every State Officer should have some electronic device available to communicate with other State Officers, the State Advisor, and the State membership.

**Verbal and written communication:** You are representing RI HOSA. You will be expected to use proper grammar for all communication, including proper spelling and punctuation.

**Prior Leadership experience and training:** Not required, however, if you have held a leadership position in your local HOSA Chapter, please describe your experience in this application.

## Responsibilities of State Officers

**Regardless of which office you hold, by accepting this position, you will be responsible for the following:**

- Attend all State Officer meetings and functions from beginning to end.
- Communicate regularly and respond promptly to all inquiries for information from chapter advisors, chapter members and others.
- Check email daily.
- Understand the mission, goals, and by-laws of HOSA.
- Understand the HOSA creed, know it from memory and be able to recite it.
- Be familiar with the organizational structure and policies of HOSA.
- Understand and correctly use parliamentary procedure.
- Be prepared to conduct organizational and state meetings.
- Be prepared to serve as a speaker. Commit to practicing speech and conference procedures prior to conferences.
- Assist other State Officers to accomplish their tasks.

## Duties of State Officers

### President

Serves on the Advisory Board and as the presiding officer at all RI HOSA state meetings, conferences, and functions.

Develops a monthly meeting calendar (virtual meetings as needed) with all State Officers. Meets and consults with State Advisor as needed.

Develops an annual program of work consistent with RI HOSA state goals and delegates tasks to accomplish goals to all State Officers appropriately.

Awards medals to RI HOSA competitors and conducts the new officer installation ceremony at the annual RI HOSA State Leadership Conference.

Additional duties as assigned by State Advisor.

### Vice President

Presides in the absence of the President and assume duties, if necessary.

Works in conjunction with the President on all duties of the President as outlined above.

May serve as President in second year as directed by the State Advisor.

Serves in any capacity as directed by the President.

Works to ensure the goals of RI HOSA are accomplished.

Additional duties as assigned by State Advisor/President.

## **Continued (duties of State Officers)**

### **Secretary**

Records State Officer meeting minutes and forwards to State Officers and State Advisor.

Records attendance for each meeting.

Sends correspondence as directed by the President.

Maintains and compiles the minutes submitted.

Serves in any capacity as directed by the President.

Works to ensure the goals of RI HOSA are accomplished.

Additional duties as assigned by State Advisor/President.

### **Historian**

Collects photos from active HOSA members and chapters at all RI HOSA functions.

Maintains, updates, and monitors all social media related to RI HOSA and edits under the direction of the President and State Advisor.

Serves in any capacity as directed by the President.

Works to ensure the goals of RI HOSA are accomplished.

Additional duties as assigned by State Advisor/President.

## **Official HOSA Uniform**

**State Officer dress code: Please be advised that you are required to wear the official uniform any time you attend any function in which you represent HOSA in any capacity.**

### **Females**

- White collared shirt.
- Navy blue dress pants with matching blazer with the \*HOSA 3 inch round patch (sewn on left side).
- Maroon women's tie is optional at state level (hosa.org).
- Black or navy close-toed shoes.

### **Males**

- White collared shirt with the official maroon HOSA tie (hosa.org).
- Navy blue dress pants with matching blazer with the \* HOSA 3 inch round patch (sewn on left side).
- Black or Navy socks with Black or Navy close-toed shoes.

\*The State Advisor will provide the HOSA 3 inch round patch.

Official HOSA clothing can be found at:

<http://www.awardsunlimited.com/store/c/104-Apparel.aspx?pi=2>

# About HOSA

## Mission

The mission of HOSA is to enhance the delivery of compassionate, quality health care by providing opportunities for knowledge, skill and leadership development of all health science education students, therefore, helping the student meet the needs of the health care community.

## Purpose

The purpose of the HOSA organization is to develop leadership and technical HOSA skill competencies through a program of motivation, awareness and recognition, which is an integral part of the Health Science Education instructional program.

## Goals

The goals that HOSA believes are vital to each member are:

- To promote physical, mental and social well-being.
- To develop effective leadership qualities and skills.
- To develop the ability to communicate more effectively with people.
- To develop character.
- To develop responsible citizenship traits.
- To understand the importance of pleasing oneself as well as being of service to others.
- To build self-confidence and pride in one's work.
- To make realistic career choices and seek successful employment in the healthcare field.
- To develop an understanding of the importance in interacting and cooperating with other students and organizations.
- To encourage individual and group achievement.
- To develop an understanding of current health care issues, environmental concerns, and survival needs of the community, the nation and the world.
- To encourage involvement in local, state and national health care and education projects.
- To support Health Science Education instructional objectives.
- To promote career opportunities in health care.

## **HOSA Creed**

I BELIEVE in the Healthcare Profession.

I BELIEVE in the profession for which I am being trained; and in the opportunities that my training offers.

I BELIEVE in education.

I BELIEVE that through education I will be able to make the greatest use of my skills, knowledge, and experience in order to become a contributing member of the health care team and of my community.

I BELIEVE in myself.

I BELIEVE that by using the knowledge and skills of my profession I will become more aware of myself. Through fulfilling these goals, I will become a more responsible citizen.

I BELIEVE that each individual is important in his or her own right; therefore, I will treat each person with respect and love. To this end, I dedicate my training, my skills and myself to serve others through HOSA.

## **HOSA Emblem**

The official HOSA emblem was adopted by the delegate assembly during the first HOSA National Leadership Conference in Oklahoma City, Oklahoma, April 27-30, 1978, from a design submitted by Tennessee HOSA. The circle represents the continuity of health care; the triangle represents the three aspects of humankind: well-being, social, physical and mental; and the hands signify the caring of each HOSA member.

## **HOSA Colors**

Navy Blue represents loyalty to the healthcare profession.

Maroon represents the compassion of the HOSA members.

Medical White represents purity of purpose.

# RI HOSA

## State Officer Candidate Application Form

Candidate instructions: Please print and complete this form, obtain required signatures, and submit to your chapter advisor to complete and send to the State Advisor. State Officer selections will be announced at the annual State Leadership Conference.

**Application due date: February 1, 2021**

Name \_\_\_\_\_

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

City \_\_\_\_\_ Zip \_\_\_\_\_ Home Telephone \_\_\_\_\_

Preferred email \_\_\_\_\_ Cell phone \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Cell \_\_\_\_\_ Email \_\_\_\_\_

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

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

Chapter Advisor \_\_\_\_\_

School Telephone \_\_\_\_\_

Birth date \_\_\_\_\_ Current Age \_\_\_\_\_

Are you a HOSA officer at your school? \_\_\_\_\_ What Office? \_\_\_\_\_



- The HOSA State Advisor will place you in a leadership position based upon chapter advisor recommendations and this application. However, if you had a choice, which office would you seek and why?
- List the HOSA activities that you feel were the most beneficial to you on the local and state levels.
- List any organizations, teams, extracurricular clubs, other than HOSA, of which you are a member.
- List any honors or awards that you have received, or offices held, during your high school career.
- What skills and qualities do you have that will help you be an effective leader in HOSA?
- Explain any “changes or additions” you would recommend to improve RI HOSA.
- What are your career/educational goals after graduation? Explain how your participation in HOSA has helped you move toward your future goals.

## Commitment to Professionalism (Code of Conduct)

I, (Print Name) \_\_\_\_\_ make a personal commitment to professionalism in my leadership role.

### I commit to:

- act professionally at all HOSA functions,
- dress in official HOSA uniform at all HOSA functions,
- attend all meetings called by the State Advisor or State HOSA President, and make these meetings a priority in my schedule,
- attend State and National Conferences, funding permitted,
- work to achieve state goals as directed by the State Advisor,
- commit to working collaboratively with all State Officers to achieve these goals.

As a candidate for State Officer for RI HOSA, I understand the responsibilities and requirements of holding office. If elected I will attend all meetings, conferences, and workshops called by the State HOSA Advisor/ State President and carry out the tasks assigned to me in the annual Program of Work. Further, I will always act in a professional manner, approach all situations with a positive attitude and promote HOSA with dignity. I understand that the lack of commitment and communications on my part may lead to the elimination of my leadership role in RI HOSA. If I fail to uphold the responsibilities of my State Officer position, per RI HOSA State Charter, and at the recommendation of the State President, the State Advisor has the authority to eliminate my leadership position in RI HOSA.

\_\_\_\_\_  
Signature of candidate

\_\_\_\_\_  
Date

**Parent/Guardian Agreement:**

As parent/guardian for the above signed candidate, I have read this application packet in its entirety and I understand the responsibilities my child will assume if elected to State HOSA Office. My son/daughter will accept these responsibilities and carry them out with my full support. I will assure my child has transportation to all required conferences and meetings.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**Administrative Agreement:**

\_\_\_\_\_ has the school's permission to run for RI HOSA Office.  
(Candidate name)

If selected, he/she will have the support of the school's administration in performing his/her duties and responsibilities.

\_\_\_\_\_  
Signature of School Administrator

\_\_\_\_\_  
Date

## CHAPTER ADVISOR RECOMMENDATION FORM

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

The above named candidate is being considered for a State Officer position. Please complete the survey to the best of your ability and submit electronically to the State Advisor by February 1, 2021.

Please rate the student using the scale provided. <b>For responses of 3 or lower, please comment.</b>	<b>1= needs help</b> <b>2=fair</b> <b>3= average</b> <b>4=good</b> <b>5= excellent</b>	Comments
Attitude		
Acts Responsibly		
Attendance		
Social Skills		
Respectfulness		
Self-Initiative		
Ability to keep commitments/meet deadlines		
Punctuality		
Leadership Potential		
Reliability Task completion		
Maturity		
Expression of ideas/ability to communicate well		
Teamwork/ ability to work with others		

**Continued (Chapter Advisor Recommendation form)**

Are you aware of any other commitments/concerns with this student that will prevent him/her from fully participating and carrying out the responsibilities of a RI HOSA State Officer?

Do you have any reservations/concerns regarding this student as a RI HOSA State Officer? If yes, explain.

Has this student had any disciplinary issues at school? If yes, please explain.

Yes \_\_\_\_\_ No \_\_\_\_\_

Number of absences this year \_\_\_\_\_

Number of tardies this year \_\_\_\_\_

Overall impression of candidate: (please circle one)

Highly recommend

Recommend

Recommend with reservation

Do not recommend

Additional comments (optional):

**Chapter Advisor Agreement:**

As Chapter Advisor for the above-signed candidate, I understand the responsibilities that he/she will assume, if elected. I will support the activities of State Office and RI HOSA and will encourage him/her to perform at peak level at all times. I will do what is necessary should my assistance be needed so that this State Officer can carry out his/her duties.

\_\_\_\_\_  
Signature of Chapter Advisor

\_\_\_\_\_  
Date