

SkillsUSA empowers its members to become world-class workers, leaders and responsible American citizens.

State Officer

Release Forms & Appendices



STATEDIRECTOR@SKILLSUSAIOWA.ORG



(515) 344-3888



PO BOX 481, ANKENY, IA 50021



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Appendix A: Student Certification (High School)

To become a state officer of SkillsUSA Iowa requires a commitment on the part of all parties concerned. In order to make that commitment, each party must understand their responsibility. This agreement must be signed by all parties indicated in order for a candidate to be eligible for office.

By submitting their application, the candidate agrees To:

- Complete all Campaign guidelines outlined in the State Officer Handbook.
- Participate in all campaign activities and abide by all rules and regulations outlined in the State Officer Handbook.

IF ELECTED, the candidate agrees To:

- Perform to the best of their ability the duties of the selected office.
- Participate in all activities scheduled by the SkillsUSA Iowa Executive Director, SkillsUSA State Officer Coach or the SkillsUSA Iowa Board of Directors.
- Purchase (if needed) pieces of the uniform that are not provided by SkillsUSA Iowa.
- If you have to resign from your position anytime during your term, you will reimburse SkillsUSA Iowa for any expenses incurred throughout the year related to your position.
- Meet and adhere to deadlines set by the officer team, SkillsUSA Iowa Staff and Board of Directors.
- Attend required scheduled activities including:
 - State Officer Training (must attend entire event)
 - State Officer Meetings
 - Fall Leadership Conference
 - District Leadership Conferences (attend your district's conference and others if requested by the state officer and/or State Officer Coach)
 - State Leadership Conference (Note: State conference has preference over prom, athletics and other school activities. If you decide to attend an activity that conflicts with the state conference, you will not participate at all during the conference. You must be in attendance for all pre-conference planning beginning one (1) day prior to the official conference.)

Please do not run for office if you are unable to completely fulfill any of the above requirements.

State Officer Candidate Initials: _____

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The Parents/Guardians, Coaches, and Employer Agree To:

- Permit the candidate to participate in all scheduled SkillsUSA Iowa State activities.
- Encourage the candidate to take full benefit of the leadership development experience.
- Provide transportation when necessary to events sponsored by SkillsUSA Iowa.
- Adhere to the State Officer Travel Policy

The Advisor and School Administrator Agree To:

- Recommend for state office only those candidates who are qualified.
- Support their State Officer Candidate(s) throughout their campaigning period and if they are elected to office, their term with the association.
- Provide a Chaperone for at least one (per officer) of the officers required events, if elected.
- Ensure the candidate's attendance at all SkillsUSA Iowa State activities, adhering to the State Officer Travel Policy.
- Follow all procedures as outlined in the State Officer Handbook.

Student Signature

Date

Parent Signature

Date

Advisor Signature

Date

School Principal Signature

Date

Appendix B: Code of Conduct

SKILLSUSA IOWA STATE & DISTRICT OFFICERS CODE OF CONDUCT

1. State Officers shall behave in a courteous and respectful manner, refraining from language and actions that might bring discredit upon SkillsUSA.
2. State Officers shall fully participate in all appropriate activities, conferences, workshops, business meetings, etc. for which they have responsibility.
3. State Officers shall abide by the dress code as approved by National SkillsUSA.
4. State Officers shall abide by the rules of each conference and recognize they serve as a role model for other members.
5. State Officers shall be willing to take and follow instructions as directed by those responsible for them.
6. State Officers shall avoid places and actions, which in any way could raise questions as to moral character or conduct. This includes activities and incidents away from SkillsUSA Iowa.
7. State Officers shall treat all members equally.
8. State Officers participating in SkillsUSA assignments shall not damage or deface property. Damage to any property or furnishings in hotel rooms, private accommodations, and/or buildings will be paid for by State Officers at their own expense.
9. State Officers shall not endorse any candidates for local or state SkillsUSA office.
10. State Officers shall refrain from endorsing any product, vendor, or sponsor or entering into financial obligations on behalf of SkillsUSA Iowa or business education, without the consent of the Executive Director.
11. State Officers shall refrain from entering into romantic relationships with other State Officers or allowing personal relationships to interfere with State Officer duties while on duty at a conference.
12. State Officers shall not hold official meetings or appoint individuals or committees without the permission of SkillsUSA Iowa.
13. State Officers shall complete assignments in a timely fashion and at the highest level of quality possible.

Iowa officers who violate or ignore any of the above subject themselves to:

1. Being removed from the SkillsUSA conference and/or activity and sent home at their own expense by their local chapter Advisor in consultation, when appropriate, with the SkillsUSA Iowa board of directors president and/or the Executive Director, and/or State Officer Coach, and/or Corporate Member.
2. Have any honors or offices withdrawn.

As a State officer, I agree that I will abide by the above prescribed code of conduct.

Student Signature

Date

Parent Signature (If the student is under the age of 18)

Date

Appendix C: State Officer Discipline Policy

STATE & DISTRICT OFFICER DISCIPLINE POLICY

Iowa State & District officers serve as ambassadors for the association and their conduct and deportment are critical to the success of this responsibility. The "SkillsUSA Iowa State & District Officers Code of Conduct" and the "State/District Officer Discipline Policy" were developed and approved by the SkillsUSA Iowa board of directors. Iowa Officers are governed by both.

1. Any concerns affecting officer performances should be sent to, or initiated by, the Board President or Executive Director of the association.
2. The Board President or Executive Director will inform the officer of charges and make an inquiry.
3. If the violation is of the type that can be corrected, the officer involved will be informed and the Board President or Executive Director will work with the officer in improving performance.
4. If the violation is not of the type that can not be corrected, removal procedures, to be determined by the Board President or Executive Director, will be initiated.
5. The officer may appeal the decision to the board of directors. The action of the board of directors is final.

As a State/District officer, I understand the above policy and agree to abide by the regulations set for Iowa Officers.

Student Signature

Date

Parent Signature *(If the student is under the age of 18)*

Date

Appendix D: Social Media & Photo Release Agreement

STATE OFFICER SOCIAL MEDIA AGREEMENT

Social media can be a useful tool to communicate with peers, members, friends, Advisors and more. Social media can also be dangerous if you are not careful. Every picture, link, quote, tweet, status, or post that you or your friends put online is forever part of your digital footprint. You never know when that will come back to hurt or help your reputation during your time in office, applying for a scholarship or new job, or other important areas of your life.

Recognizing the above:

- I take responsibility for my online profile, including my posts and any photos, videos or other recordings posted by others in which I appear.
- I will not degrade others before, during, or after conferences or competitions.
- I will post only positive things about my peers, Advisors, other members, judges and any stakeholders of SkillsUSA
- I will use social media to purposefully promote abilities, organization, community, and social values.
- I will consider “Is this the me I want you to see?” before I post anything online.
- I will ignore any negative comments about me and will not retaliate.
- If I see another officer post something potentially negative online, I will have a conversation with that person. If I do not feel comfortable doing so, I will talk to the president, or an Advisor.
- I am aware that I represent SkillsUSA Iowa, my school, my family, and my community at all times, and will do so in a positive manner

Appendix D: Social Media & Photo Release Agreement

SKILLSUSA IOWA PHOTO RELEASE FORM

I hereby consent to and authorize the use and reproduction by SkillsUSA Iowa, or anyone authorized by SkillsUSA Iowa, of any and all photographs/digital images/videotapes/recordings of (individual's) name _____ at all SkillsUSA Iowa Activities, for use by SkillsUSA Iowa, its employees, officers and agents, and the right to copyright and/or use, reuse and/or publish, republish photographic pictures, digital images, videotapes and recordings in conjunction with the students name listed above.

I also give permission for these photographs/digital images/videotapes/recordings to be used in its entirety and/or edited version as deemed necessary by SkillsUSA Iowa (to include usage of images on SkillsUSA Iowa and other Career and Technical Student Organizations websites).

Furthermore, permission is also given for the photographs/digital images/videotapes/recordings to be used by SkillsUSA Iowa at any time in the future without further clearance from me.

I understand that these photographs/digital images/videotapes/recordings may be used for marketing purposes (including websites) by SkillsUSA Iowa.

I have read the foregoing release, authorization and agreement, before signing below, and warrant that I fully understand the contents thereof.

I have read, understand and agree to the SkillsUSA Iowa Photo Release Form and the State Officer Social Media agreement form.

Student Signature

Date

Parent Signature *(If the student is under the age of 18)*

Date



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Appendix E: Non-Discrimination Policy

Non-Discrimination Policy

It is the policy of the SkillsUSA Iowa not to discriminate on the basis of race, creed, color, sexual orientation, gender identity, national origin, sex, disability, religion, age, political party affiliation, or actual or potential parental, family or marital status in its programs, activities, or employment practices as required by the Iowa Code sections 216.9 and 256.10(2), Titles VI and VII of the Civil Rights Act of 1964 (42 U.S.C. § 2000d and 2000e), the Equal Pay Act of 1973 (29 U.S.C. § 206, et seq.), Title IX (Educational Amendments, 20 U.S.C. §§ 1681 – 1688), Section 504 (Rehabilitation Act of 1973, 29 U.S.C. § 794), and the Americans with Disabilities Act (42 U.S.C. § 12101, et seq.). If you have questions or complaints related to compliance with this policy by SkillsUSA Iowa, please contact Kent Storm, Executive Director, kent@skillsusaiowa.org, 515-344-3888, the Iowa Civil Rights Commission, Grimes State Office Building, 400 E. 14th St, Des Moines, IA 50319-0201, telephone number, 515-281-4121, FAX number: 515-242-5840, email: icrc@iowa.gov, or the Director of the Office for Civil Rights, U.S. Department of Education, Citigroup Center, 500 W. Madison Street, Suite 1475, Chicago, IL 60661-4544, telephone number: 312-730-1560, FAX number: 312-730-1576, TDD number: 877-521-2172, email: OCR.Chicago@ed.gov. Additionally, you may contact the legal counsel for the Iowa Department of Education, Grimes State Office Building, 400 E. 14th Street, Des Moines, IA 50319-0146, telephone number: 515-281-5295.

I have read, understand, and agree to follow the SkillsUSA Iowa Non-Discrimination Policy:

_____	_____
Student Signature	Date
_____	_____
Parent Signature <i>(If the student is under the age of 18)</i>	Date



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Appendix F: Iowa Department of Education Photo Release

Complete the stand alone Iowa Department of Education Publication Release Form located here: [IDOE Publication Release Form - 6-26-2020.pdf](#)



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Appendix G: Medical Liability Release Form

Legal Name: _____ Date of Birth: _____

Home Address: _____

Parent/Guardian's Legal Name: _____

Parent/Guardian Telephone: _____

Parent/Guardian's Legal Name: _____

Parent/Guardian Telephone: _____

Alternate/Emergency Contact: _____

Alternate/Emergency Contact Telephone: _____

Relationship: _____

Local Chapter Advisor: _____ School Name: _____

Insurance Company: _____ Name of Insured: _____

Group # _____ Policy # _____

Location of Card _____ Insurance Phone # _____

Please completely describe any medical condition which may recur or be a factor in medical treatment: _____

If currently taking medication(s), please provide the name of medication(s): _____

Allergies: (Medications, food, insects, latex, etc.) _____

Dietary Restrictions: (Allergies, preference, religion, etc.) _____

LIABILITY RELEASE. I certify that the medical liability release information described is accurate and complete to the best of my knowledge. I understand that each individual is responsible for their own insurance coverage during any and all SkillsUSA Iowa activities. I hereby release the SkillsUSA Iowa Board of Directors, the National Staff, State and Local SkillsUSA Associations, and any designated individual in charge of the SkillsUSA group or specific activity from any legal or financial responsibility with respect to my personal or my 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.

Signature of Officer	Printed Name	Date
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Signature of Parent/Guardian	Printed Name	Date
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Signature of Chapter Advisor	Printed Name	Date
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Signature of School Administrator	Printed Name	Date
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Appendix H: Officer Travel Policy

Officer's Legal Name: _____ Date of Birth: _____

With the high number of state officers and the high number of events that an officer would attend in the year, some drivers can be allowed to drive themselves to certain activities to represent SkillsUSA Iowa as a part of the duties.

For an officer to be eligible to transport themselves to an event they must:

- Be over the age of 16
- Have a current valid driver license*
- Have current liability auto insurance on their vehicle*

* A copy of these items must be on file with SkillsUSA Iowa before travel.

For an officer to drive themselves, the event must be:

- An event that their chapter is not attending
- Less than an hour away from their place of residence
- Pre-approved one week in advance by SkillsUSA Iowa

Events that officers cannot drive themselves to (but not limited to):

- State Officer Training
- District Leadership and Skills Conference
- State Leadership and Skills Conference
- Any National Conference

Before every event, a transportation form must be approved by the state office at least one week prior to travel.

Section 1 - Parent/Legal Guardians, my child has permission to: **(please initial)**

Yes	No	
		My child can utilize public transit (Rideshares, Taxis, Buses, Subways, etc.) with a SkillsUSA approved adult.
		My child can utilize public transit (Rideshares, Taxis, Buses, Subways, etc.) by themselves.
		My child can drive themselves to SkillsUSA Iowa events. If yes, please complete section 2.
		My child can drive other student officers (that have parent/guardians' permission) in their vehicle at SkillsUSA Iowa events. If yes, please complete section 3.
		My child can ride with other student officers driving (that have parents/guardians' permission)
		My child can ride in a car driven by an SkillsUSA Iowa approved adult
		My child may be chaperoned by a representative of SkillsUSA Iowa in the event that a school employee or parent/guardian is unable to participate in functions required of officers as part of their official responsibilities.

My signature below indicates that I have read and understand the above SkillsUSA Iowa officer travel policy.

Signature of Officer	Printed Name	Date
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Signature of Parent/Guardian	Printed Name	Date
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If your child will have the option to drive themselves to SkillsUSA Iowa events, please complete the following to give them permission.

Section 2 - Driving themselves to events

I/we hereby permit _____ to transport themselves in their private vehicle to locations approved by the SkillsUSA Iowa advisors. I understand that we are responsible for ensuring compliance with all state licensing and driving requirements pertaining to our child.

Insurance Policy # _____ Insurance Carrier: _____

Signature of Parent/Guardian	Printed Name	Date
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Section 3 - Driving other State Officers

I/we hereby permit _____ to transport the other SkillsUSA Iowa state officers in their private vehicle to locations approved by the SkillsUSA Iowa advisors. I understand that the officers riding with my child must have their parents' written permission to ride with my child, and I further understand that we are responsible for ensuring compliance with all state licensing and driving requirements pertaining to our child.

Insurance Policy # _____ Insurance Carrier: _____

Signature of Parent/Guardian	Printed Name	Date
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