



WEST VIRGINIA  
FFA ASSOCIATION

State Officer Application  
Due: June 1

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

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

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

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Years of FFA Membership: \_\_\_\_\_ Years of Ag. Education Completed: \_\_\_\_\_

Year in which the State FFA Degree is/will be awarded: \_\_\_\_\_

If elected, during the term of office as a state officer your educational situation will be:

Still in High School

In College

Not in School

If you will be in college during your service as a state officer, at what institution will you be enrolled: \_\_\_\_\_

If you will be in college during your service as a state officer, what year of college will you be completing?    First year    Second year    Third year

Please provide the following information using only the space provided in this application. Please do not attach additional listings of activities or awards. If insufficient space is provided, please choose which activities or awards you believe to be most important in describing your preparation for service as a state FFA officer.

**FFA Offices and Leadership Positions**

<b>Office</b>	<b>Level</b>	<b>Year</b>

**FFA Activities and Involvements**

<b>Activity</b>	<b>Level</b>	<b>Year</b>

**Non-FFA Activities and Involvements**

<b>Activity</b>	<b>Group/Organization</b>	<b>Level</b>	<b>Year</b>

If elected to a state office, will you have access to a vehicle for travel to state officer meetings, chapter visits, chapter banquets, and other assigned destinations during your year of service?      Yes                              No

Please indicate the office for which you wish to run:

\_\_\_\_\_ *First Choice*

\_\_\_\_\_ *Second Choice*

**Verification of Academic Standing and GPA**

Please indicate your most recent grade point average: \_\_\_\_\_

Is this a college or high school GPA? \_\_\_\_\_

The FFA member named in this application seeks election to a state office in the West Virginia FFA Association. By signing this form, I certify that the FFA member is presently, or was at the time of his/her departure from school, in good academic standing, and that the grade point average indicated above is accurate.

Signature of high school guidance counselor if not yet in college, or signature of college academic advisor if one or more semesters of college have been completed.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**SAEP Information**

In 200 words or less, describe the nature and scope of your Supervised Agricultural Experience Program in the space below.

**Member and Parent/Guardian Signature**

Parent/Guardian Signature is required only for candidates that are running to serve as a State Officer during their senior year of high school. Candidates that have or will graduate before the election process only need their signature below.

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

## ***Recommendation for State FFA Office***

In the space below, please ask your FFA chapter advisor(s) to provide any information that he/she believes to be valuable in consideration of you as a candidate for a state office in the West Virginia FFA Association.

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Advisor's Signature

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Date

## ***Evaluation of Prior Performance***

If you are presently serving as a State Officer of the West Virginia FFA Association, please ask a member of the West Virginia FFA Association State Staff to provide a brief evaluation of your performance in the space given below.

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State Staff Signature

Date

*Please return the completed application to:*

West Virginia FFA Association  
Building 6, Suite 825  
West Virginia Department of Education  
1900 Kanawha Boulevard East  
Charleston, WV 25305

**Deadline for Postmark of All Applications is June 1 of the year in which the candidate will run for state office.**