

2026-2027 NOMINATION FORM FOR NORTH CAROLINA HOSA STATE OFFICER APPLICANT

Serving as a North Carolina HOSA State Officer typically requires a 12-month commitment to the organization. For this election cycle, individuals elected to a State Officer position will serve a 14-month term, spanning May 1, 2026, through June 30, 2027.

Due to the responsibilities and expectations associated with State Officer service, it is vital that all members who aspire to become a North Carolina HOSA State Officer are qualified, able, and willing to assume the duties required of the position.

Candidates should read carefully and review the statements below prior to submitting this form. After discussing the responsibilities of a North Carolina HOSA State Officer with their parent(s)/guardian(s), Local Chapter Advisor, and school administrators, the candidate should submit this form, along with all other required materials, as part of their State Officer Application.

Candidate Statement

If elected as a 2026-2027 North Carolina HOSA State Officer during this election cycle, I agree to serve my entire 14-month term of office, dedicate my time and effort to serving the organization, and uphold the mission, goals, and objectives of North Carolina HOSA. I will project a positive and professional image of HOSA at all times and abide by the Code of Conduct, Policies and Procedures, and Bylaws of North Carolina HOSA.

I understand that service as a State Officer includes participation in required conferences, trainings, meetings, and events, **including attendance at two (2) International Leadership Conferences during the 2026–2027 term, which is specific to this election cycle.** I further agree to fulfill and complete all responsibilities, obligations, and assignments associated with the role.

Candidate Printed Name

Candidate Signature

Date

Parent/Guardian Statement of Support (for applicants under the age of 18)

I approve of my child applying for a North Carolina HOSA State Officer position. If elected, I agree that they will be able to spend the time and have the resources and transportation necessary to carry out the duties of office.

Parent/Guardian Printed Name

Parent/Guardian Signature

Date

Local Advisor Statement

It is my belief that this candidate will fulfill the responsibilities of a North Carolina HOSA State Officer, represent North Carolina HOSA appropriately, and I highly recommend this student. I also promise to support this student during their term of office.

Local Advisor Printed Name

Local Advisor Signature

Date

Principal Statement of Support

This school will support _____ in the successful fulfillment of the duties of a North Carolina HOSA State Officer, which may include time away from school.

Principal Printed Name

Principal Signature

Date