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| ***Wisconsin Association of FCCLA****Student Delegate Code of Conduct* | *http://www.fcclainc.org/down/taglinelogo.jpg* |

The FCCLA State Office requires that each delegate read the Student Delegate Code of Conduct. Each delegate must have a completed original Participant Authorization Form submitted to the FCCLA State Office prior to attending Wisconsin FCCLA events.

1. The term “delegate” shall mean any FCCLA member or student attending the conference. FCCLA and its activities are school sponsored events.
2. Delegates shall keep their advisers informed of their activities and whereabouts AT ALL TIMES. Each local adviser should establish a system through which to meet this regulation and should share this information with students prior to attendance at the event.
3. Delegates will be prompt and prepared for all activities.
4. Identification badges will be worn at all official FCCLA events.
5. Delegates agree to conduct themselves in a professional and ethical manner at all times and follow the directives of official conference staff, other adult supervisors, and hotel staff.
6. Appropriate business-like attire is required. Please see the [Mandatory Wisconsin FCCLA Dress Code](https://dpi.wi.gov/sites/default/files/imce/fccla/pdf/mandatorydresscodewifccla.pdf) for approved apparel for FCCLA events.
7. Delegates **are required to attend** all general sessions, assigned events or meetings, and activities provided by Wisconsin FCCLA.
8. Cell phone courtesy will be expected at all times. Students should turn off cell phones during sessions or events.
9. Delegates shall not use their own cars or ride in vehicles belonging to others unless accompanied by an adult adviser. Transportation must be approved by the local school district.
10. Delegates will be financially prepared for all possibilities.
11. During events that require an overnight stay, delegates shall stay in housing arranged by the Wisconsin Association of FCCLA, not with friends or relatives or unauthorized hotels/motels.
12. Advisers are expected to enter and check hotel rooms to ensure the standards outlined in the Code of Conduct have been met and to provide adequate supervision of students.
13. There shall be no defacing of public property. Any damage to property or furnishings in the hotel rooms, building, or in the meeting/conference facilities must be paid by the individual or chapter responsible. Local chapters will be billed directly by the hotel or the meeting/conference site for any damages.
14. **There is no co-ed visitation permitted in any hotel room.** Co-ed visitation is permitted in hotel lobbies and other public areas ONLY**.**
15. For overnight events, all delegates must honor conference curfew. **CURFEW is 11:30 PM**. Curfew is defined as: **“all delegates will be in their own rooms and quiet.” 12:00 Midnight is LIGHTS OUT.**
16. No use of tobacco will be permitted during the event, including general sessions, meetings, competitive events, tours, or in public facilities.
17. No alcoholic beverages or controlled substances, such as narcotics, marijuana, cocaine, in any form, shall be possessed or consumed by delegates at any time, under any circumstances.
18. Delegates who violate or ignore any of the conference rules may be sent home immediately, at their own expense. Local advisers, the state adviser, parents and school officials will be notified.
19. Student delegates are responsible to follow their local school district rules of conduct and will be held accountable and face consequences determined by the local school district.
20. Delegates who violate or ignore any part of the Code of Conduct will subject their entire delegation to being unseated or their candidates or competitive-event participants disqualified.
21. Delegates agree to give permission to the Wisconsin Association of FCCLA and host site to post images of participants via Department of Public Instruction websites, Wisconsin FCCLA state officer website, FCCLA newsletters, and host site promotional, teaching or advocacy resources.

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| ***Wisconsin Association of FCCLA****Participant Authorization Form* | *http://www.fcclainc.org/down/taglinelogo.jpg* |

Directions: This form should be completed by each student delegate. Students may return completed forms to their chapter adviser. Chapter advisers provide all completed original forms to the FCCLA State Office upon checking-in at the FCCLA event. Copies of completed forms should be retained by the chapter adviser during the FCCLA event.

**Student Authorization**

I, (***print name***), an active FCCLA member, have read and fully understand the FCCLA Student Delegate Code of Conduct. I agree to follow these rules and am aware of the consequences that will result if I violate any of them. Furthermore, I understand and appreciate the importance of these rules for the success of the FCCLA event.

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| Delegate Signature & Date | School Principal Signature & Date |
| FCCLA Chapter Name or School |

**FCCLA Adviser Authorization**

I certify that the FCCLA member named on this form has been authorized to represent our chapter as a member at FCCLA events. This student has received information and instruction concerning the FCCLA Student Code of Conduct prior to this event.

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| Adviser Name (*print*) |
| Adviser Signature & Date |

**Parent/Guardian Authorization**

My child, (***print name***), has my permission to participate in Wisconsin FCCLA events. I have read and understand the Student Delegate Code of Conduct. Furthermore, I have spoken with my child regarding these rules and the responsibility he/she has to abide by them. I agree that the chapter adviser(s), the state FCCLA staff and/or school officials, have the right to send my son/daughter home from the activity at my expense if he/she violates the Code of Conduct or his/her conduct has become a detriment. I also authorize the adviser or state FCCLA staff to secure the services of a physician or hospital and to incur expenses for necessary services in the event of an accident or illness. I agree to pay for any and all costs incurred. I understand that my child may be photographed or videotaped while attending this event, and give Wisconsin FCCLA and host site permission to use such images for any lawful purpose such as publicity, illustration, advertising, and Web content.

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| Parent/Guardian Name (*print*) | Parent/Guardian Signature & Date |
| Daytime Phone # (*area/number*) | Cell Phone # (*area/number*) |
| Student Insurance Company Name | Student Policy Number |

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| ***Wisconsin Association of FCCLA****Local Adviser Procedures and Responsibilities* | *http://www.fcclainc.org/down/taglinelogo.jpg* |

The FCCLA State Office requires EACH local adviser who attends Wisconsin FCCLA events to **read, complete and return a copy of this form** to the FCCLA State Office.

1. Local advisers are responsible to have each student who attends Wisconsin FCCLA events read & discuss the Student Delegate Code of Conduct, and sign & return the Participant Authorization Form.
2. Local advisers are responsible to know the whereabouts of all of their students at all times. The local adviser should establish a system through which to meet this regulation and should establish this system prior to attendance at the conference.
3. Local advisers are responsible for the supervision of their student delegates and should be available to their students at all times.
4. An identification badge will be worn at all official FCCLA events.
5. At all events, advisers must have a list of their students as well as all necessary contact information [i.e., home phone number, name(s) of parent/guardian].
6. At overnight events, established curfew will be enforced. Local advisers are responsible to do room checks to ensure that students are in the room assigned them.
7. No alcoholic beverages or controlled substances, such as narcotics, marijuana, cocaine, in any form, shall be possessed or consumed by delegates or advisers at any time, under any circumstances.
8. The local district principal and/or designated administrator will be contacted in an emergency if the local adviser cannot be located within a reasonable amount of time or is unable to provide an adequate amount of supervision. Student emergencies include but are not limited to: an accident, possession of drugs or alcohol, violation of conference rules, family emergency, and any other situation designated an emergency.

***I have read and fully understand the Local Adviser Procedures and Responsibilities and agree to comply.***

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| Advisor Name (print) | Advisor Signature & Date Signed | FCCLA Chapter Name or School |
| Advisor Cell Phone | Advisor Insurance Company | Advisor Insurance Policy Number |
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| **Advisor Emergency Contact Information** |
| Name: | Relationship of Individual to Advisor: |
| Daytime Phone (area/number): | Cell Phone (area/number): |

**In an emergency, the following local administrators should be contacted:**

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| **1st Contact** | **2nd Contact** |
| Name | Name |
| Title | Title |
| School Phone # (area/number) | School Phone # (area/number) |
| Cell Phone # (area/number) | Cell Phone # (area/number) |
| School Principal Name (print) | School Principal Signature | Date Signed |