



# District Officer Application

## FLORIDA FFA ASSOCIATION

Submit Application to:  
 FLORIDA FFA ASSOCIATION  
 5700 SW 34TH STREET SUITE 106  
 GAINESVILLE, FLORIDA 32608

### Application Instructions

The primary responsibility of a district officer is to serve the Florida FFA Association, Agricultural Education and Agriculture as an ambassador in district activities in a way that will inform, motivate and inspire FFA members, advisors and others to embrace and uphold the FFA mission of making a positive difference in the lives of students by developing their potential for premier leadership, personal growth and career success through agricultural education.

According to the Florida FFA Constitution, in order to be elected to a district office, a member must hold the Chapter FFA Degree. District officers must be elected each year at the annual state convention.

Candidates are required to complete and submit this application along with a sealed letter of recommendation from the FFA Advisor and a one-page resumé of FFA, school and community activities.

District Officer Applications should consist of the following:

- District Officer Application (with all signatures)
- One, sealed letter of recommendation from the FFA Advisor
- One-page resumé of FFA, school and community activities

This application is due **May 15th**. (This is not a postmark date)

Please note that late applications will not be considered.

### Applicant Information

APPLICANT NAME		
CHAPTER		
AREA	DISTRICT	SUB-DISTRICT
HOME ADDRESS		
CITY	STATE	ZIP
EMAIL ADDRESS		

### Applicant Certification

If I am selected as a district officer to represent the Florida FFA Association, I agree to carry out the duties and responsibilities assigned by the State FFA Executive Secretary, State FFA Advisor, and appointed District FFA Advisor as well as uphold the FFA mission.

APPLICANT SIGNATURE	DATE
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### Parent/Guardian Certification

We have discussed the duties and responsibilities of representing the Florida FFA Association as a district officer with the applicant. If selected, we approve his/her desire to become a district officer.

PARENT/GUARDIAN SIGNATURE	DATE
PARENT/GUARDIAN SIGNATURE	DATE

### Advisor Certification

I hereby certify that I have reviewed this application for honesty and completeness, and have submitted my sealed letter of recommendation.

ADVISOR SIGNATURE	DATE
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### School Certification

I hereby certify that the application has shown outstanding ability as evidenced by his/her leadership and cooperation in student, chapter and community development activities and has a satisfactory scholastic record in all high school subjects, therefore I approve his/her selection as a district officer.

ADMINISTRATOR SIGNATURE	DATE
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