**Michigan FFA State Officer Nominating Committee Application - Regional Level**

**READ THIS ENTIRE PAGE FIRST!**

1. Applicants must have received the greenhand degree to serve on the regional nominating committee in the Michigan FFA State Officer election process
2. Applicants must have participated in three FFA activities above the chapter level
3. The Michigan FFA reserves the right to not accept application if it is felt that a conflict of interest may occur: (i.e. family member, same chapter, same regional officer team)
4. All information relating to the state officer selection process must be kept confidential, even beyond state convention.

Submit a PDF of your completed application through the appropriate submission link at <https://michiganffa.org/association/applications/>. No paper copies of applications will be accepted.

Please refer to the Association Calendar for deadline: <https://michiganffa.org/association/calendar/>.

***DO NOT include this page when submitting your completed application.***

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**Name:** type response here

**Membership Number:** type response here

**Home Address (Street, City, Zip):** type response here

**Grade Level:** type response here

**Email Address:** type response here

**Phone Number:** type response here

**Parent(s)/Guardian(s) Names:** type response here

**FFA Chapter:** type response here

**Advisor Name(s):** type response here

**Date Received Greenhand Degree:** type response here

**Region:**type response here

**Why should you be selected to be on this committee:**

Max 100 words. Erase these words and begin typing your response here.

**Please list any event in which you participated above the chapter level (indicate year):**

Max 5 activities with 1 line of description per activity. Erase these words and begin typing your response here.

**Certification**

I certify that to the best of my knowledge the information contained in this application is true and accurate. I understand that any and all information must be kept confidential, even beyond State Convention.

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agriscience Teacher Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

***When application is complete this line should be the last line on Page 1.***