**BUSINESS PROFESSIONALS OF AMERICA**

**ILLINOIS ASSOCIATION**

NEEDS YOU!

WANT TO GET MORE INVOLVED IN OUR ORGANIZATION?

SIGN UP TO BE A STATE OFFICER CANDIDATE.

**Qualifications for Officer Candidates:**

1. Be a **registered** chapter, state, and national member by **October 9**
2. Have **Sophomore,** **Junior,** or **Senior** status with one year previous BPA membership

3. Your Chapter, State, and National dues must be **paid (received & processed)** by **November 6**

4. 2.75 Cumulative GPA on a 4.0 scale

5. Have 24/7 access to your e-mail account

6. Be willing to work within a team/virtual atmosphere

7. Be able to give extra time to the State Organization

**State Officer Responsibilities:**

Information may be obtained from the following sources: **Policies & Procedures Manual** for the Illinois Association, Sec. C State Association Divisions, f. Officers and **Illinois Association By-laws**, Article VI. Duties of Officers (This document will be e-mailed to you)

**Attend All Mandatory Meeting Dates: (Meetings will be held virtually)**

FLC 2020 – Friday 11/13

SLC/FLC Planning/State Officer Training – Thursday (PM) 12/3, Friday 12/4 (TBD), Saturday 12/5 (TBD)

Spring Officer Training – Friday (PM) 2/5 & Saturday 2/6

State Leadership Conference – Wednesday 2/24 (TBD), Thursday 2/25, Friday 2/26, Saturday 2/27

Summer State Officer Meeting – if scheduled by the Leadership Directors (TBD)

FLC 2021 – (TBD) – May possibly be an In-Person Conference

**EACH CHAPTER MAY HAVE TWO OFFICER CANDIDATES AND MAY NOT SUBMIT MORE THAN TWO FORMS.**

IF YOU ARE INTERESTED IN RUNNING FOR AN OFFICE, COMPLETE (electronically) THE BOTTOM PORTION OF THIS PAGE AND E-MAIL IT TO THE ELECTION CHAIRPERSON, **AFTER YOUR ADVISOR HAS SUBMITTED YOUR MEMBERSHIP FOR 2020 – 2021.** (E-mail address at bottom of form) OFFICER CANDIDATE INFORMATION WILL BE E-MAILED TO YOU AND YOUR ADVISOR.

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**PLEASE E-MAIL THE FOLLOWING INFORMATION BY 10:00 PM, OCTOBER 14, 2020.**

Name Telephone No.

Home Address

City ZIP Code

E-mail Address

(Non-school e-mail address)

School Telephone No.

School Address

City ZIP Code

Advisor Home Telephone No.

Advisor School E-mail Address

Current class status (delete the two that do not apply) Sophomore Junior Senior

Please indicate number of years you have been a member \_\_\_\_\_\_\_\_\_\_

**E-MAIL THIS COMPLETED FORM TO: glennajpyzik@att.net**