HOSA Chapter Officer Application

Thank you for your interest in becoming a HOSA officer. This is a HUGE responsibility as you represent our chapter of HOSA—Future Health Professionals. Our goal is to build this organization bigger and better each year, with the help of a strong officer team. Please fill out the information below and prepare for your interview with the HOSA Chapter Advisor at a later date.

Name:	<u></u>	
Cell number:	Grade Level:	
Health Science or related classes taken:		
List involvement in Sports/Clubs/Organizations:		
Circle the desired officer position:		
President VP Public Relations	VP Competitive Events	
VP Community Service Secretary Tro	easurer Historian Reporter	
Why did you choose this position?		
Why do you feel you're the best person for this position?		
Name one aspect you hope to improve or change in HOSA as a	n officer?	
It is an honor to be chosen as a HOSA officer as it is one of the people desire the job. It is to be taken seriously and you are to organization meetings. If you do not fulfill your duties, you will	attend monthly officer meetings and all	
Student Signature Parent Sign	iature	

^{*} Advisors are encouraged to use this template to create an officer application form that works for your chapter.