

Missouri HOSA Chapter Assurance Form

The Missouri HOSA members of		Chapter from		
Multiple	e Release Form was received by the	School District, along with their parer Form and the accompanying HOSA C HOSA Local Chapter Advisor and will will carry a copy of this form with him/he	ode of Conduct. The be kept on file at the school	
	s have been provided the following so the housed by the local school district:	tatement and signed parental consent	forms have been collected	
	I hereby authorize the Missouri Department of Elementary and Secondary Education to publish and make publically available information that may otherwise be considered "personal information" within the meaning of State Statue RSMo 105.1500. Such information may include name, photographs, school name and Career and Technical Student Organization involvement on the Missouri HOSA website, conference apps, or social media accounts.			
It is the	•	ity to notify the State Advisor of any stu	udent member without such	
and pa	ssed a Criminal Background Check a	by the school district attending any HC and are in good standing at the school Conduct on file at the Missouri HOSA S	district. All Local Chapter	
	(Local Chapter Advisor Printed Name)	(Local Chapter Advisor Signature)	(Date)	
	(School Administrator Printed Name)	(School Administrator Signature)	(Date)	

DO NOT SEND INDIVIDUAL FORMS TO THE STATE. INDIVIDUAL FORMS MUST BE IN POSSESSION OF THE LOCAL CHAPTER ADVISOR.

This form is to be submitted for each HOSA event by the advertised due date. Local Chapter Advisors will not be allowed to register their chapter onsite without submission of this form.