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| Chapter Certification Form The HOSA members of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School have read the Code of Conduct, Dress Code and completed the CTSO Multiple Release Forms.  In addition, we certify that all staff provided by the school district and attending this conference with the Colorado CTSOs have completed and passed a Criminal Background Check and Sexual Abuse Prevention Training.  Our chapter has an emergency plan. This plan has been communicated with attending members, parents and administrators.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_  (Advisor Printed Name) (Advisor Signature) (Date)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_  (School Administrator Printed Name) (School Administrator Signature) (Date)  This form is to be submitted during on-site conference registration. Do not send individual forms to the state. Individual forms must be in possession of the advisor. |