



New Jersey Department of Agriculture | Office of Food, Agriculture & Natural Resources Education  
200 Riverview Plaza, 3<sup>rd</sup> Floor | P.O. Box 330 | Trenton, NJ 08625 | 877-AgEdFFA | jerseyageducation.nj.gov

*In cooperation with the New Jersey Department of Education  
In cooperation with the New Jersey Department of Education*

## 2025 NATIONAL FFA CONVENTION ADVISOR STATEMENT OF ASSURANCES

Advisor/Chaperone conduct should be exemplary at conferences, thus setting a good example for the students. Conduct of advisors/chaperones at all conferences shall adhere to the code established for student conduct and dress. Additionally, good sportsmanship is essential, and it is expected that advisors/chaperones will provide assistance to instill an understanding that there is more to life than just winning. This form is REQUIRED for all advisors/chaperones attending the National FFA Convention and should be submitted with National Convention materials.

| Chapter Name   |   |
|--|---|
| An advisor/chaperone who violates/ignores any of the below statement of assurances subjects themselves to: 1. Being invited to submit their resignation from the FFA.  |   |
| <ol style="list-style-type: none"><li>Chapter advisors/chaperones are responsible for having each student attending FFA events read, discuss, sign and return the Student Code of Conduct and Waiver form.</li><li>Chapter advisors/chaperones are responsible for knowing the whereabouts of their students at all times. Each chapter advisor should establish a policy with their students prior to the convention in order to comply with this regulation.</li><li>Chapter advisors must have with them at the convention a list of students, as well as phone addresses, home phone numbers, and parents' or guardians' names and cell phone numbers.</li><li>Curfew will be enforced by advisors/chaperones. Chapter advisors are responsible for room checks to ensure their students are in their assigned rooms at curfew.</li><li>No use of drugs or alcoholic beverages are permitted by advisors, chaperones, or other staff during the convention.</li><li>Identification badges or official convention pins/tags/name badges will be worn at all times.</li><li>Chapter advisors are responsible for their students' conduct and shall be available to their students at all times or shall have another advisor/chaperone available to their students.</li><li>The principal and/or designated administrator will be contacted in emergency situations if the chapter advisor cannot be located within a reasonable amount of time or is unable to give proper amount of supervision. Student emergencies include: accidents, possession of drugs or alcohol, breaking convention rules, family emergencies, and any other situation designated as an emergency.</li><li>Chapter advisors shall not violate any state or federal laws in commission of their duties.</li><li>Advisors/Chaperones will: A. <b>Respect</b> every individual's culture, values and experiences. B. <b>Welcome</b> every individual's contribution to advancing our communities &amp; the agricultural industry. C. <b>Cultivate</b> an environment that allows every individual to recognize and explore their differences. D. <b>Create</b> leadership opportunities for every individual to enhance their personal &amp; professional endeavors.</li></ol> |   |
| I have read the STATEMENT OF ASSURANCES and agree to comply with these guidelines.   |   |
| _____<br>Advisor/Chaperone Name (Printed)  | _____<br>Signature of Advisor/Chaperone |
| _____<br>Advisor/Chaperone Name (Printed)  | _____<br>Signature of Advisor/Chaperone |
| _____<br>Advisor/Chaperone Name (Printed)  | _____<br>Signature of Advisor/Chaperone |
| _____<br>Advisor/Chaperone Name (Printed)  | _____<br>Signature of Advisor/Chaperone |
| In case of emergency, the following local administrators should be contacted (MUST provide contact information for two administrators).  |   |
| Name:  | _____<br>Title:                         |
| School Phone:  | _____                                   |
| Cell Phone:  | _____                                   |
| Signature:   | _____                                   |
| Name:  | _____<br>Title:                         |
| School Phone:  | _____                                   |
| Cell Phone:  | _____                                   |
| Signature:   | _____                                   |

*"The New Jersey FFA Association is a resource and support organization that does not select, control or supervise local chapter or individual member activities except as expressly provided for in the state FFA constitution, bylaws or policies."*