



Application for State Office

July 2024 - Jan 2026

The application should be completed in full and returned to the Executive Officer no later than June 23, 2024

<u>Last Name</u>	<u>First Name</u>	<u>Member ID</u>	<u>Home Chapter</u>
<u>Year Joined</u>	<u>Age</u>	<u>Grade</u>	<u>MC Term Date</u>
<u>Address</u>	<u>City</u>	<u>Zip Code</u>	<u>Cell</u>
<u>Email</u>	<u>Employer</u>	<u>After School</u>	

Qualifications:

- Have served, or currently serving as Master Councilor of your Chapter
- Holds an Obligation Card having learned the Initiatory and DeMolay Degree Obligations.
- Have completed the Representative DeMolay Award
- Have Completed all 5 LCC's and received your Lamp of Knowledge

Duties of a State Officer in Iowa DeMolay:

1. You shall positively represent DeMolay at all times. "SET THE EXAMPLE"
2. Communicate with Chapters, sharing DeMolay Iowa's Programs, Events, Promoting Membership Growth and Retention.
3. Communicate your participation of all DeMolay events with your Family, Coaches, Employers and Religious leaders as applicable. (No Excuse for not knowing)
4. Attend all Iowa DeMolay State Events, to include rehearsals.
5. Attend your home chapter's stated meetings and activities (unless away attending school).
6. Maintain at least a C in all classes.
7. Learn to memory the ritual of your office.
8. Attend all State Officer Meetings held monthly and contribute to event planning.
9. Participate in Chapter Installation Ceremonies when requested.
10. Serve at the will and pleasure of the State Master Councilor and Executive Officer.

Why do you wish to serve DeMolay Iowa as a State Officer and what are your future plans in DeMolay?

Initial the following:

- _____ I have read and understand the duties of a State Officer and agree to fulfill the duties and responsibilities.
- _____ I understand that as a State Officer, I will continue to strengthen and support my home Chapter, as well as the other Chapters in the state.
- _____ I agree that I will continue to improve myself with my membership in DeMolay.
- _____ I have reliable and dependable transportation for travel to state events/activities.
- _____ I understand that I will be responsible to pay registration fees for the state events I attend.
- _____ I understand that I serve at the will and pleasure of the State Master Councilor and Executive Officer and may be removed for failure to perform my duties.
- _____ I will maintain a high standard of personal conduct, grooming, hygiene and appearance.
- _____ I will have on me at all meetings something to write on and write with.

_____ *Applicant Signature* Date: _____

_____ *Parent Signature* Date: _____

_____ *Chapter Advisory Council Chair Signature* Date: _____

Please email form by end of day June 23rd, 2024 to myers.robert.l.iii@gmail.com