Any officer may be declared “inactive” and/or removed from office in the following situations.

**Declaration of “inactive” status and possible removal from officer for:**
1. Any state officer who fails to adequately perform the duties of the office will be removed from office.
2. Any state officer member who fails to attend any announced meeting without just cause (illness, death in immediate family, or an unforeseen emergency) shall be placed on probation for a period of time to be determined by the Board of Directors.
3. Any state officer whose behavior, while in the performance of duties, is contrary to published rules of conduct or whose behavior is injurious to the image of this association shall be removed from office.
4. A state officer who fails to maintain NMAA requirements shall be placed on probation for one grading period. Failure to bring up grades shall result in removal from office.
5. Removal from office carries the obligation of repayment of chapter, district, and state funds used to maintain the executive council member in office.
6. The executive board members shall be convened to assess each case which may result in removal from office.
7. Any state officer who resigns or is removed from office, and wishes to run again will need to submit an appeal to the NM Board of Directors prior to the application deadline.

**Immediate and automatic removal from office for:**
1. Failure to adhere to the Code of Ethics
2. Failure to adhere to Policy and Procedures

I fully understand the possible causes for removal from office, rules, regulations, conditions, and directions set forth by the Policies and Procedures for SkillsUSA NM as well as the State Officer Coordinator.

I understand, if removed, I will immediately return all materials purchased by SkillsUSA NM. This includes: state officer uniform, state officer pin, polo’s, etc.

_________________________________________ Date: ______________

Officer Candidate Signature

_________________________________________

Parent/Guardian Signature

_________________________________________

Local Advisor Signature