

CTSO ACCOUNTABILITY FORM

_____ First Semester

_____ Second Semester

Circle CTSO: DECA FBLA FCCLA HOSA SkillsUSA TSA Educators Rising



School:	
Chapter Advisor:	
Classroom Advisor(s):	

Number of Registered National Members: (attach copy of registration or member list)	
---	--

Officers:*	
Position:	Student Name:

Required Events: (Check off each required item as completed.)			
Fall Semester		Spring Semester	
	Recruit and register members (attach list); register with the state and national affiliate organizations (submit verification by May 1); elect and install officers (submit list by Sept. 30); attend region competition (\$200)		Hold regular chapter events (Minimum of 3) (\$100 each)
	Hold regular chapter events (Minimum of 3) (\$100 each)		Hold regular leadership meetings (minimum of 3) \$50 each)
	Hold regular leadership meetings (minimum of 3) \$50 each)		Participate in state competition (submit report to coordinator) (\$500)
	Attend fall leadership conference (submit report within one week of event) (\$200)		Organize and participate in one community service project (\$200)
	Complete and submit CTSO Accountability form		Complete and submit CTSO Accountability Form
	If applicable, conduct parent meeting for overnight travel and complete required agenda and paperwork		If applicable, conduct parent meeting for overnight travel and complete required agenda and paperwork

Meetings, Events and Activities:* (List officer meetings, club meetings, fund raising events, service opportunities, club activities and other events your chapter participated in this semester.)	
Dates(s)	Description of Meeting, Event or Activity

*Attach additional pages as needed.

Signature: _____ Date: _____
(CTSO Advisor)

Signature: _____ Date: _____
(CTE Coordinator)