Outstanding HOSA Leader

This event is designed to honor one Outstanding HOSA Leader from each HOSA chartered association in recognition of the member’s commitment to HOSA and outstanding leadership of his/her chartered association.

Each chartered association will select one outstanding HOSA leader to be recognized at the HOSA International Leadership Conference.

a. Each chartered association will be permitted to name one Outstanding HOSA Leader.

b. Chartered associations will determine their own criteria/process for selecting the Outstanding HOSA Leader. Please contact your state advisor to determine the selection procedures in your state/country.

c. The chartered association’s Outstanding HOSA Leader is typically a recent or current state officer.

d. The chartered association’s Outstanding HOSA Leader MUST attend the International Leadership Conference. The purpose of the event is to recognize a leader who will be participating at the ILC and can serve as the chartered association’s representative at the ILC.

e. If you are your chartered association’s Outstanding HOSA Leader you should register for this recognition event with your conference registration.

f. IN ADDITION, the Outstanding HOSA Leader is asked to e-mail summary information (page 2 of these guidelines) and a picture to hosa@hosa.org in the form of attachments by May 15 of the recognition year. The subject line of the e-mail should be: Outstanding HOSA Leader from _________ (list chartered association.) The attachments should include:

   • One page summary (page 2) to include name, permanent mailing address, career goal and one paragraph statement about how you have benefitted from your involvement in HOSA.

   • Photo of honoree in HOSA uniform in electronic format

g. Each Outstanding Leader will be presented with a plaque on stage at the HOSA Recognition Session at the ILC.
If you are named as your chartered association’s Outstanding HOSA Leader, please create a page in Word with the information requested below, and e-mail it to hosa@hosa.org by May 15.

Name: _________________________________________________________________

Permanent Mailing address: ______________________________________________

_______________________________________________________________________

E-mail: __________________________ Phone: _____________________________

Career Goal: ___________________________________________________________

In your own words, provide a statement about how you have benefitted from your involvement in HOSA.