



STATE EDUCATION TEAM ADMINISTRATION SUPPORT STATEMENT

Applicant Name: _____

Administration Support Statement

I understand that the educator listed above is applying for the SkillsUSA Florida State Education Team, and I have reviewed the requirements of the position outlined [here](#) (available for download at skillsusafl.org/resources). By signing below, I endorse their application to be a part of the State Education Team and will support their efforts to uphold the standards and principles of SkillsUSA.

If possible, I will support their attendance the State Leadership and Skills Conference during their years of service to the State Education Team. I understand that their registration fee may be reimbursed by SkillsUSA Florida following the SLSC, contingent on successful participation, and if budget allows.

School Name (please print)

Administrator Name (please print)

Administrator Signature

Date

INSTRUCTIONS: Complete the required fields and obtain necessary signatures. Upload the completed statement with the applicant's online application at <https://form.jotform.com/242345436955160> by January 1 of the program year.