

Only this form must be uploaded to Blue Panda prior to the first Missouri FBLA event your chapter participates in for the school year. Failure to complete this form will result in my student's ineligibility to participate in Missouri FBLA activities.

Missouri FBLA Adviser Assurance Form

(for the Comprehensive Consent Form)

I, _____, and I, _____, as representatives
(Adviser Name) (Principal/Director Name)

for the FBLA chapter at _____, hereby certify that:
(School Name)

_____ Adviser Initials	_____ Principal Initials	All conference-registered school representatives (including but not limited to students, instructors, advisers, and observers) participating in Missouri FBLA sponsored conferences, have completed the Comprehensive Consent Form .
_____ Adviser Initials	_____ Principal Initials	The Comprehensive Consent Forms of all conference-registered school representatives (including but not limited to instructors, advisers, and observers) will remain in my possession at all times during any Missouri FBLA sanctioned conference.
_____ Adviser Initials	_____ Principal Initials	I understand that guardians reviewed the statement, Missouri Department of Elementary and Secondary Education to publish and make publicly available information that may otherwise be considered "personal information" within the meaning of State Statute RSMo 105.1500. Such information may include name, photographs, school name and Career and Technical Organization involvement on the Missouri FBLA website, conference apps, or social media accounts.
_____ Adviser Initials	_____ Principal Initials	I understand that, under no circumstances (other than those approved by the State Adviser and/or State Chair) I may leave the conference premises without my student(s) for the entire duration of the conference. I agree to be the responsible party for my students and their actions.
_____ Adviser Initials	_____ Principal Initials	I agree to supervise my student(s) for the entire duration of time they choose to swim in any aquatic facilities on any property during the conference. I understand that I, as the adviser, cannot allow any student barred from swimming (per their parent/guardian on the Comprehensive Consent Form) from utilizing any aquatic facility.
_____ Adviser Initials	_____ Principal Initials	I understand that I, as the adviser of my local chapter, am responsible for registering my student(s) should they qualify for the National Leadership Conference. Failure to not completed Missouri Registration Forms, in addition to those required by National FBLA, will result in my students being ineligible to compete at NLC.

I recognize and understand that Missouri FBLA will NOT collect the **Comprehensive Consent Forms** of my conference-registered school representatives (including but not limited to students, instructors, advisers and observers). I also have communicated the complete contents of this signed Assurance page with all Conference-registered school representatives (including but not limited to students, instructors, advisers, and observers).

_____ (Signature of School Adviser)	_____ (Date)	_____ (E-mail)
_____ (Signature of Principal/Director)	_____ (Date)	_____ (E-mail)

In the event of an emergency regarding you as the adviser that would prevent you from appropriately supervising your students, who should Missouri FBLA contact?

_____ (Personal Emergency Contact Name)	_____ (Personal Emergency Contact Phone Number)
_____ (School Emergency Contact Name)	_____ (School Emergency Contact Phone Number)