



## Area 1 CONFERENCE INFORMATION

TO: *Area 1 Advisors*

FROM: Ashley Bernard, Area 1 Spring Conference Chair

DATE: November 11, 2015

SUBJECT: HOSA Spring Leadership Conference, January 29-30, 2016

The HOSA Area 1 Spring Leadership Conference will be held at **Lake Travis High School, 3324 RR 620 South, 78738 in Austin, Texas**, beginning Friday, January 29<sup>th</sup>, 2016, with officer candidate interviews at the Holiday Inn Express and Suites-Lakeway at 8:00 a.m. and ending Saturday, January 30<sup>th</sup>, 2016 at approximately 5:00 p.m. at the close of the awards ceremony at Lake Travis High School Performing Arts Center.

### REGISTRATION

All participants (students, advisors, and chaperones) must be registered. Advisors **MUST** be registered as advisors. Follow the directions on the "How to complete the Online Registration" document to register your participants found at the end of this document.

Only HOSA members whose membership was entered using the online affiliation program may be registered as conference participants. Use the online conference registration program to register your Participants. Be sure to print 2 copies of your **completed** registration, one to keep for your records, one to **bring** with your registration fees. Please direct your business department to include **the Texas chapter numbers on the registration fee payment check**. Complete your registration using the following link:

<http://www.registermychapter.com/hosa/tx/ac/>

Fees for this conference are:

Advisor \$0  
Secondary Student \$25.00  
Chaperone \$0

Registration site for Area Conference will open after the completion of On Line Testing

Registration deadline is **January 7, 2016**

**Conference Registration Fees will be collected at Area  
Conference On-Site Check In**

Make all registration fees checks payable to HOSA, TA.  
No PO's will be accepted.

**You are required to pay a registration fee for every student and advisor on your online registration. No deletions or refunds will be made after the conference registration deadline.**

### **ONSITE CHECK-IN**

Onsite check-in will be from 12:30pm to 2:30pm on January 29, 2016 at Lake Travis High School Performing Arts Center. Each advisor will be issued their conference registration printout, nametags, programs, maps, etc after conference registration fees have been paid. Team substitutions may be made **only** during onsite check-in. During onsite check-in the following items will be collected:

- **Conference Registration Fees**
- Medical Art Posters
- Student Eligibility forms
- Advisor & Student Code of Conduct & Medical Liability forms

Advisors will be allowed to enter the PAC for the onsite check-in between 12:30pm – 2:30 PM. There is no space for students to wait inside the building.

**PLEASE HOLD YOUR STUDENTS ON THE BUS UNTIL OPENING CEREMONY  
DOORS OPEN AT 1:30PM!**

### **PARKING**

School buses may park in the band parking lot (P-3) located in front of the Performing Arts Center. Please only park in this lot.

### **HOTEL RESERVATIONS**

**Holiday Inn Express and Suites-Lakeway  
15707 Oak Grove Blvd  
Lakeway, TX 78734  
(512) 735-5555**

Each advisor is to make his/her own room reservation with the Hotel.

**Please be reminded that all Delegates must be housed in approved conference housing to be eligible for competition. If you encounter problems with your rooming please contact Janet Villarreal at 1-877-728-0150.**

When making hotel reservations please identify your group as being part of Health Occupations Students of America and the name of your school and city. Check in time is 3 p.m. Single room rate is \$130.00 plus 7% city tax. Double Room Rate for 2 to 4 person is \$130.00 plus 7% city tax. State tax is an additional 6%, unless you present a state tax exempt form prior to or at the time of check-in.

Reservations must be made by **January 7, 2016** to get the conference rate. After the deadline date, any uncommitted rooms on the HOSA block will be released and additional reservations will be honored on a rate and space available basis, as would be for the case of early arrivals and late departures.

Each school will pay for their own block of rooms and any incidental charges upon check-in if paying in cash or upon departure if secured with a credit card.

Miscellaneous Room Information: Reservations are held until 6:00PM on the day of arrival, unless accompanied by a deposit or an individual's credit card. Check-in time is 3 p.m. and check-out time is 11:00 a.m. Upon request, the hotel will be happy to arrange for baggage storage for luggage until actual departure from the hotel.

Complimentary breakfast for breakfast up to four (4) people per room is included.

Do not unload luggage until you have obtained room keys. This will avoid overcrowding in the lobby. Please remind your students of the following:

1. No phone calls from the rooms.
2. No room service/meals charged to the room.
3. No movies unless an advisor prepays at the front desk.
4. There will be other guests in the hotel - be courteous.

**No students are to be left at the hotel without a designated advisor/chaperone.**

#### **Directions from the hotel to Lake Travis High School**

- Travel south on RR 620 (approximately 5 miles or approximately 10 minutes)
- Turn right onto Cavalier Drive to enter the high school (Texaco gas station on the left)
- Continue through the 4-way stop
- Turn right to park into lot P-3 in front of the Performing Arts Center, and buses can park here

#### **SOCIAL**

The Area 1 Officers have planned a fun-filled evening for Friday night, January 29, 2016.

### **Opening and Closing Ceremony Dress**

It is the responsibility of each advisor to help ensure that EACH of their student delegates understands the conference dress policy PRIOR to arriving at the conference. Please remind your student delegates that they have signed a HOSA Conduct Code that states that they will adhere to the new dress code policy for all general sessions. There should be no misunderstanding that when the student delegate tries to seek admission to the general session and does not adhere to the new dress policy that he/she will not be admitted.

### **Dress Code**

Remember, professional dress is required at opening and closing ceremony. Students are not to wear, denim, jeans, hats, flip flops, tennis shoes, spaghetti straps, strapless tops and dresses, leggings, short skirts, t-shirts, etc. This also applies to courtesy corps, and students wearing scrubs and EMT uniforms. Knowing that students participating in courtesy corps and certain skills events don't necessarily dress in professional business attire, those students will need to change into appropriate dress for opening and closing ceremony. Students who manage to get in wearing inappropriate dress are not allowed on stage when their name is called. It is difficult to name every possible situation we may encounter when comes to inappropriate dress so please explain to your students what business attire entails

### **NAME TAGS**

Conference nametags must be worn at all times during all HOSA activities.

### **ID Requirements**

All Competitors will be required to show proof of a picture ID upon check in for all competitive events. Failure to show an appropriate ID may result in in being disqualified.

### **VOTING DELEGATES**

Each chapter may register two voting delegates for the area conference. It is best to select students that will not be competing. Voting delegates must wear their ribbon and sit in the reserved section during the business session.

### **COMPETITIVE EVENTS**

Read carefully the HOSA, TA Advisor Handbook regarding competitive events. Please prepare students to have a positive attitude. They should understand that the true benefit of competition is in the preparation, participation, and networking - and not only winning.

### **COURTESY CORPS**

Each advisor may but is not required to register two students to serve as courtesy corps. These students will be given an assignment. Courtesy Corp students will receive their assignment 2 weeks prior to the conference date via their advisor. Courtesy Corp students should not be involved in competitive events.

## **ADVISOR RESPONSIBILITY**

All advisors must participate in conference management by sharing in conference duties.

## **CODE OF CONDUCT AND MEDICAL LIABILITY RELEASE FORMS**

Advisors are responsible for having their students complete the HOSA Code of Conduct form and Medical Liability Release form. A parent or guardian's signature is required on both forms. Advisors should sign the Advisor's Code of Ethics form. Please have all of these forms in your possession during the conference.

## **SPECIAL NEEDS STUDENT EVENTS**

Student Eligibility Forms for students participating in First Aid/Rescue Breathing, Personal Skills, Speaking Skills and Interviewing Skills must be turned in during onsite packet pickup. **If special accommodations need to be made for your special needs student, please email these needs to Janet Villarreal at [texashosa@stx.rr.com](mailto:texashosa@stx.rr.com) .**

## **SCHOLARSHIPS**

All scholarship applications **must** be mailed to Kelly Cowan, Texas Officer Coordinator, 201 Cullen Ct., La Porte, TX 77571. Applications **MUST** be post marked on or before the Area Conference Registration Deadline

## **OFFICER PACKETS**

All officer applications and forms **MUST** be mailed to Kelly Cowan, Texas Officer Coordinator, 201 Cullen Ct., La Porte, TX 77571. All applications **MUST** be posted marked on or before the Area Conference Registration Deadline. All officer candidates must be registered for the conference.

## **AWARD PRESENTATION**

All participants should plan to attend the closing ceremony. If a competitor is unable to attend the awards ceremony to receive his/her medal, the advisor should collect those medals at the close of the award ceremony.

## **CHAPERONES**

The **required** ratio for adult supervision of students is **1 adult sponsor** (who is not a HOSA Board of Directors member) **per 10 students** for all HOSA activities.

## **LOST & FOUND**

Any items (notebooks, purses, money, etc.) found should be taken to the Tabulation Room. Individuals having lost an item may claim said item from the Tabulation Room. Any items not claimed prior to the start of the closing ceremony will be discarded.

## **POSTER & NOTEBOOK PICK-UP**

All Health Careers Posters, Extemporaneous Health Posters, Outstanding HOSA Chapter scrapbooks, etc. must be picked up from the Tabulation Room **at least one hour prior** to the start of the closing ceremony. Any unclaimed posters or notebooks will be discarded.

## Contact Information

Conference Chair Information:

Name: Ashley Bernard

Email: [bernarda@ltsidschools.org](mailto:bernarda@ltsidschools.org)

Phone: 512-533-7758

Executive Director/State Advisor:

Janet E. Villarreal

texashosa@stx.rr.com

877-728-0150

## AREA 1 SPRING LEADERSHIP CONFERENCE DIRECTIONS

### Traveling from Round Rock/Pflugerville

- Travel south on RR 620
- Turn right onto Cavalier Drive to enter the high school (Texaco gas station on the left)
- Continue through the 4-way stop
- Turn right to park into lot P-3 in front of the Performing Arts Center, and buses can park here

### Traveling from San Antonio on HWY 281

- Travel north on HWY 281
- Take the HWY 71 E exit towards Austin and travel 26.7 miles
- Turn left onto Bee Cave Parkway (Stoplight - CVS on the Northeast corner)
- Turn left onto RR 620 North (Stoplight)
- Turn left onto Cavalier Dr to enter the high school (Texaco gas station on the right)
- Continue through the 4-way stop
- Turn right to park into lot P-3 in front of the Performing Arts Center, and buses can park here

The screenshot shows a Google Maps interface with driving directions. The starting point is Lake Travis High School (3324 Ranch Road 620 South, Austin, TX 78738) and the destination is Holiday Inn Express & Suites Austin Northwest (15707 Oak Grove Boulevard, Lakeway, TX 78734). The route is highlighted in blue and red, showing a 10-minute drive of 4.7 miles. The directions list the following steps:

- Head northeast toward Cavalier Dr (0.1 mi)
- Turn left onto Cavalier Dr (0.3 mi)
- Turn left onto Ranch Rd 620 (4.2 mi)
- Turn left onto Oak Grove Blvd (469 ft)

The map shows the route starting from the high school, heading northeast on Cavalier Drive, then left onto Ranch Road 620, and finally left onto Oak Grove Boulevard. The destination is marked with a red pin. The map also shows the Colorado River and Lake Argyle in the background.

# Area 1 Tentative CONFERENCE SCHEDULE

## Friday, January 29, 2016

8:00 AM	Area Officer Credentialing	Holiday Inn Express and Suites-Lakeway Board Room
1:00-2:30PM	On-site Check-in	Lake Travis High School Performing Arts Center Lobby
1:30 PM	Doors open for Opening Ceremony	Lake Travis High School Performing Arts Center
2:00-3:00 PM	Opening Ceremony	Lake Travis High School Performing Arts Center
3:00-4:00 PM	Voting Delegate Meeting	Lake Travis High School Performing Arts Center
3:00-4:00 PM	Advisor Orientation	Lake Travis High School Black Box Theater
5:00 PM	Judge's Hospitality	D-100
5:15 PM	All advisors who are event managers for 6:00 PM events (#1-7) report to tabulations	Lake Travis High School Library
5:45 PM	Event managers and assistants have rooms ready and Judges in place for events #1-7.	

6:00 PM

1. Biomedical Debate
2. Community Awareness
3. Creative Problem Solving
4. Extemporaneous Health Poster
5. Forensic Medicine
6. Health Career Display ( <b>Round 1-Top ten will be posted outside event room</b> )

	7. Health Education
5:45 PM	All advisors who are event managers for 6:30PM events (#8-14) report to tabulations
6:00 PM	Event managers and assistants have rooms ready and Judges in place for events #8-14.
6:30 PM	8. HOSA Bowl
	9. Medical Photography ( <b>Round 1-Top ten will be posted outside event room</b> )
	10. Parliamentary Procedure
	11. Public Service Announcement ( <b>Round 1-Top ten will be posted outside event room</b> )
	12. EMT
	13. CERT
	14. Medical Innovation

6:15 PM All advisors who are event managers and event assistants for 7:00 PM events (#1-8), report to tabulations

6:30 PM Event managers and assistants have rooms ready and Judges in place.

7:00PM	1. Biomedical Laboratory Science
	2. Clinical Nursing
	3. Clinical Specialty
	4. CPR/First Aid & Life Support Skills
	5. Dental Science
	6. Extemporaneous Writing
	7. Home Health Aide
	8. Medical Assisting
6:45 PM	All Advisors who are event managers and event assistants for the 7:30 PM events (#9-16), report to tabulations
7:15 PM	Event managers and assistants have rooms ready and judges in place
7:30 PM	9. Nursing Assisting & Personal Care
	10. Physical Therapy



11. Public Health ( <b>Round 1- Top ten teams will be posted outside tabulation room</b> )
12. Sports Medicine
13. Veterinary Science
14. Health Career Display ( <b>Round 2- displays not advancing to round two will remain in the room until all judging is done</b> )
15. Medical Photography ( <b>Round 2- medical photography folders not advancing to round two can be picked up from holding room</b> )
16. Public Service Announcement ( <b>Round 2</b> )

## Saturday, January 30, 2016

7:00 AM Tabulation Room Opens LTHS Library

7:30 AM All advisors, who are event managers and assistants for 8:30 events, report to the tabulations room.

8:15 AM Event managers and assistants have rooms ready for event, judges in place.

8:30AM	1. Healthy Life Styles
	2. Interviewing Skills /Job Seeking Skills
	3. Medical Art/Extemporaneous Health Poster judging
	4. Medical Spelling ( <b>Spell down</b> )
	5. MRC Partnership
	6. HOSA Chapter Reflections
	7. Prepared Speaking/ Speaking Skills
	8. Public Health ( <b>Round 2</b> )
	9. Researched Persuasive Speaking

12:00PM Lunch on your own

2:30 PM Doors open for Awards Ceremony

Lake Travis High School  
Performing Arts Center

3:00 PM Awards Ceremony

Lake Travis High School  
Performing Arts Center

√	<b><u>Area Spring Conference Registration Check List</u></b>
	<p><b>1.</b> Completed the online registration process by <b>January 7, 2016</b></p> <ul style="list-style-type: none"> <li>a. choose correct events for each participant</li> <li>b. Emailed any accommodations your special needs event competitor will need.</li> <li>c. <b>Confirmed 1 adult chaperone for every 10 students</b></li> </ul>
	<p><b>2.</b> Made two Printouts of your online registration</p>
	<p><b>3.</b> Conference Registration Fees will be collected at Area Conference On Site Check in. <b>Texas chapter numbers should be included on the memo line of the payment check.</b></p>
	<p><b>4.</b> Make Hotel Reservations by: <b>January 7, 2016</b> Make a copy of rooming list and tax exempt form for Hotel to help expedite Hotel check in</p>
	<p><b>5.</b> Sign Advisor/Chaperone Code of Ethics and Medical Liability form</p>
	<p><b>6.</b> Have students sign Code of Conduct, and Medical Liability make sure that forms are completely filled out (make sure to have a copy of these forms to turn in at registration table, Advisor must be in possession of the original forms while at the conference) <b>Place forms in an envelope and write the name of your school and chapter number on the front.</b></p>
	<p><b>8.</b> Mail Scholarship Applications to <u>Kelly Cowan</u> on or before conference registration deadline. Make sure that applicants are registered for conference.</p>
	<p><b>9.</b> Mail officer applications to <u>Kelly Cowan</u> on or before conference registration deadline. Make sure that applicants are registered for conference.</p>

**ON-SITE CHECK IN**

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To expedite On-Site Check in please make sure that you have the following ready to turn in

	Student Code of Conduct and Medical Liability Forms (Place copies inside an envelope with your school name and chapter number on the front of envelope)
	Student Eligibility forms for Special Needs students
	Medical Art Poster
	List of “No Shows”
	List of Substitutes
	Check for payment of conference registrations fees. Texas chapter numbers must be printed on the memo line of the check.

# Hotel Rooming List

(Make copies of form if necessary.)  
(Please bring copy of form with any changes upon check-in)

Hotel \_\_\_\_\_

Phone ( \_\_\_\_\_ )

Contact Person: \_\_\_\_\_

Number of Rooms Reserved: \_\_\_\_\_

**PERSON RESPONSIBLE FOR GROUP:** \_\_\_\_\_

**ESTIMATED TIME OF ARRIVAL:** \_\_\_\_\_

Persons in Room # \_\_\_\_\_

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Persons in Room # \_\_\_\_\_

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Persons in Room # \_\_\_\_\_

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# HOSA CODE OF CONDUCT

A good reputation enables members to take pride in their organization. HOSA members have an excellent reputation. Your conduct at any HOSA function should make a positive contribution to the reputation that has been established. **HOSA Conference participants are AWARE THAT:**

1. HOSA follows the UIL rules and regulations established for secondary high schools.
2. STUDENT behavior should at all times be a positive reflection of your school and Texas HOSA.
3. Student conduct is the responsibility of the student and their advisor.
4. STUDENTS will abide by the HOSA Conference Attire Policy at all business sessions, general sessions, competitive events, and other conference activities. HOSA conference name badges shall be worn at all times when participating in HOSA conference activities.
5. STUDENTS are expected to attend all general sessions and other scheduled conference activities. Please be prompt and show respect to those in the audience and on stage.
6. STUDENTS shall keep their advisors informed of their activities and whereabouts at all times.
7. STUDENTS who disregard the rules will be subject to disciplinary action and will be sent home at their own expense. Parents will be notified.
8. STUDENTS may not purchase, consume, or be under the influence of alcohol or drugs at any time. Smoking or using tobacco products at a school-related or school-sanctioned activity on or off school property is prohibited at any time.
9. STUDENTS are to report any incidents, injuries or illness to their local or state advisor immediately.
10. STUDENTS are expected to observe the designated curfew. (Curfew is defined as being quietly in your own assigned room by the designated hour.)
11. The student and his/her parents will be expected to pay for any and all damages relating to student behavior which results in loss or damage to property.
12. Students and/or parents will be responsible for any long distance phone calls, charges to the room, etc.
13. **I have read the above Code of Conduct for HOSA Conferences and agree to abide by the rules.**

I, \_\_\_\_\_, hereby grant Texas HOSA permission to make photographs, videotapes, broadcasts, and/or sound recordings, separately or in combination, of me and permission to use the said photographs, videotapes, broadcasts, and/or sound recordings for educational and promotional purposes on any delivery system.

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Printed Name of Parent / Guardian      Parent / Guardian Signature      Date

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Printed Name of Student      Student's Signature      Date

# HOSA, TA Advisor's and Chaperone's CODE OF ETHICS

## HOSA ADVISORS AND CHAPERONES ARE EXPECTED TO:

1. Project a positive and professional image of Texas HOSA to all those with whom they interact.
2. Promote HOSA as a positive student experience; therefore, will act as a positive role model for students in dress, voice, attitude, actions, and demeanor.
3. Be accountable to and for their students in all HOSA-related activities.
4. Understand and follow established processes within the HOSA organization that protect the rights of all members.
5. PERFORM all assigned duties. Failure of an advisor to perform their duties may result in their chapter being disqualified from conference activities by the Board of Directors.

HOSA advisors are proud of the standard of excellence they maintain for themselves and their students. Attendance at any HOSA function implies acceptance and practice of these standards.

I have read the above Code of Ethics for HOSA Advisors/Chaperones and agree to accept and practice these standards.

Signature

Please check one

Chapter number

Date

Advisor

Chaperone

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Plan of Action: For failure to follow the Advisor/Chaperones Code of Ethics.

Conference with the Board of Directors.

Consequences to be determined by the Board of Directors, up to notification sent to the appropriate administrators.

I, \_\_\_\_\_, hereby grant Texas HOSA permission to make photographs, videotapes, broadcasts, and/or sound recording, separately or in combination, of me and permission to use the said photographs, videotapes, broadcasts, and /or sound recordings for educational and promotional purposes on any delivery system

\_\_\_\_\_  
Advisor Signature/Date

# MEDICAL LIABILITY RELEASE FORM

**DIRECTIONS:** Due to legal restrictions, it is necessary that all delegates, Chaperons, guest and HOSA advisors complete this form as a prerequisite for eligibility to attend any HOSA Leadership Conference. The HOSA chapter advisor should keep the original copy for Area and State Conferences. For National Conference, the original forms are sent to the State Advisor who forwards them to National HOSA.  
PLEASE TYPE OR PRINT ALL INFORMATION

Delegate's Name: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Parent/Guardian Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Delegate's Physician: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Physician's Address: \_\_\_\_\_

Alternate Contact: \_\_\_\_\_

Telephone Number: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Local Advisor: \_\_\_\_\_

School Name: \_\_\_\_\_

Student is covered by group or medical insurance? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, complete the following information:

Name of insured: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Group #: \_\_\_\_\_ Policy#: \_\_\_\_\_

Please completely describe any medical condition which may recur or be a factor in medical treatment:

- a. Allergy: \_\_\_\_\_
- b. Physical Handicap: \_\_\_\_\_
- c. Convulsions: \_\_\_\_\_
- d. Medicine Reactions: \_\_\_\_\_
- e. Blackouts: \_\_\_\_\_
- f. Disease of any kind: \_\_\_\_\_
- g. Heart or Lung problems: \_\_\_\_\_
- h. Other (be specific): \_\_\_\_\_

If currently taking medication, please provide the following information:

\* Name of medication: \_\_\_\_\_

\* Prescribing Physician and Phone Number: \_\_\_\_\_

**LIABILITY RELEASE:** I certify that the information described above is accurate and complete to the best of my knowledge. I understand that each individual is responsible for his/her own insurance coverage during this trip. I hereby release the National HOSA Board of Directors, the National Staff, State and Local HOSA Associations, and any designated individual in charge of the HOSA group or specific activity from any legal or financial responsibility with respect to my personal or my student/child's participation in or contact with any known element associated with an activity including competitive events.

**PARENT/GUARDIAN:** Please check one of the following and sign your name.

\_\_\_\_\_ I give my permission for immediate medical treatment as required in the judgment of the attending physician. Notify me and/or any persons listed above as soon as possible.

\_\_\_\_\_ I do not give permission for medical treatment until I have been contacted.

Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

(The above line must be signed by the parent or legal guardian, regardless of applicant's age with the exception of post-secondary applicants.)

Delegate's Signature \_\_\_\_\_ Date \_\_\_\_\_