**GEORGIA DECA**

**ADVISOR CODE OF CONDUCT**

For each primary advisor attending any Georgia DECA sponsored conference, he/she and the school administrator must read and sign the advisor code of conduct and turn in by **September 16, 2016** or before attending any conference.

**As an advisor of Georgia DECA, I agree and understand that:**

1.I, the Advisor, stand as the adult responsible for the students (in loco parentis – in place of the parents) during the time the student is under the control of the school while attending all Georgia DECA Activities.

2. I am in full authority of my students from the time of departure to the Georgia DECA conference through and including return from the conference including but not limited to assuring that students follow dress code, behavior guidelines, and active participation in the conference workshops/activities.

3. I must be concerned with my measure of responsibility since I have authority – adequate supervision is a must from the time students leave school for the event until students return to school.

4. I recognize that the established conduct code must be adhered to at all times and I am responsible for enforcing it.

5. I am required to obtain a signed copy of the Georgia DECA Permission/Professional Standards forms from each delegate or an alternate form required by my school or school system. Georgia DECA will not collect these forms; I am responsible for having these forms in my possession for the duration of the conference.

6. I agree to assist Georgia DECA in ensuring that the conference experience is a strong educational and leadership opportunity for the students. I understand that I will be assigned to assist with conference activities. I agree to accept these assignments and carry out the necessary responsibilities.

7. I, the Advisor, and my students attend conferences, field trips, etc. purely for our own benefit and advantage; thus control and liability rests with local school and its agents.

8. I understand that due to the nature of this conference with the meeting and lodging facilities in separate locations, I will be responsible for ensuring that the students have an adult chaperone with them at all times when they leave either the hotel or conference center. I am responsible for encouraging attendance and active participation in conference events. I understand that at the set curfew, I will physically check on my students to ensure they are in the correct room and following the code of conduct.

9. I agree that I will ensure that my students arrive at the conference dressed according to the specified dress code. Additionally, I will monitor my students’ conduct so that they are not a distraction, preventing other delegates from enjoying the conference experience.

10.  I agree that my students will attend the complete program and that my chapter will not leave any session early. I will work to ensure that travel arrangements and professional attitudes encourage students to actively participate in the entire conference event.

***Note: Each school system has established their own requirements on accepted principles regarding student control on educational trips which correlate with the accepted principles stated above. Per Georgia DECA policy, there must be one advisor and/or chaperone for every ten students or portion thereof at Georgia State conferences.  Per DECA, Inc. policy, there must be one advisor and/or chaperone for every eight students or portion thereof at national conferences.***

**Code of Conduct Agreement**

I have read and understand this Advisor Code of Conduct and am fully aware of the information contained herein.

I agree that if, for any reason, I am in violation of any of the rules of the conference, I may be brought before the appropriate discipline committee for an analysis of the violation.  I understand that any penalty and reasons for it will be explained to me before it is carried out.  I further realize that this conference is designed to be an educational function and all plans are made with that objective.

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| School: |

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| Chapter Advisor’s Signature | Print Advisor’s Name | Cell Phone: |
| Administrator’s Signature | Print Administrator’s Name | Date: |