



Board of Directors Ethics/Code of Conduct Policy Agreement

The personal conduct of the members of the Florida PTA Board of Directors directly affects the image of the Florida PTA. Therefore, each member shall:

- Recognize that the chief function of the Florida PTA is to serve the best interest of children and youth.
- Be knowledgeable about Florida PTA's bylaws, policies, procedures, programs, finances and management.
- Exhibit and abide by the Vision, Mission and Purpose of the PTA in all programs, meetings, and activities.
- Comply with Florida PTA's bylaws, policies and procedures.
- Abide by and support publicly all positions and decisions of Florida PTA's Board of Directors.
- Will keep confidential matters confidential.
- Interpret "volunteer" to mean that I have agreed to work without compensation in money, but having been accepted as a worker, I expect to do my work according to standards, as the paid staff expect to do their work.
- Prioritize organizational goals in accordance with personal goals at all times.
- Promise to take to work an attitude of open-mindedness; to be willing to be trained for it, and to bring to it interest and attention.
- Not participate with a company where I, as a board member or others on the board will profit personally, or someone in their immediate family.
- Conduct all organizational and operational duties with professional competence, fairness, impartiality, honesty, efficiency, and effectiveness while demonstrating the highest standards of personal integrity.
- Exercise discretion, sensitivity, and sound judgment in discussing Florida PTA matters, protecting all privileged or confidential information.
- Exemplify responsiveness and open communication in fulfilling the duties and responsibilities as assigned.
- Avoid promotion of or profit from any activity in conflict with the mission and policies of Florida PTA.
- Exhibit nonpartisan conduct while serving within the Florida PTA governance structure.
- Exhibit respect, understanding and professionalism to staff, board members, and local members.

By signing this Agreement, I hereby certify that I have read and understand the above information.

Print Name

Position

Signature

Date

(After signing, please give form to the Office Manager. Thank you.)