ADA and IDA Leadership Application Form 2021

1. Nominee Information
   Name: [ ] Phone: [ ]
   Address: [ ]
   Email: [ ]

2. Position Selection—Please check all positions that you are interested in. Each opportunity has one available position unless otherwise noted.

   **IDA Leadership Opportunities**
   - ☐ IDA Vice President-Elect
   - ☐ IDA Speaker
   - ☐ IDA Vice Speaker
   - ☐ Editor-Journal IDA
   - ☐ IDA Treasurer

   **ADA At-Large Opportunities**
   - ☐ Advisory Committee on Annual Meetings (2 positions)
   - ☐ Commission for Continuing Education Provider Recognition (2 positions)
   - ☐ Commission on Dental Accreditation
   - ☐ Council on Members Insurance and Retirement Programs (3 positions)

   **ADA Seventh District Opportunities**
   - ☐ Government Affairs

   **National Commission on Recognition of Dental Specialties and Certifying Boards**

3. Previous Experience—Have you had previous component, ADA or IDA experience that would assist you in this role?

   ☐ Yes  If yes, dates of service: [ ]
   ☐ No

4. Personal Statement—In 200 words or less, explain why you would be a good candidate to serve in the above role:

5. Deadline for Nominations
   All nominations must be received at the Indiana Dental Association office by February 28, 2021. Nominations may be returned to Doug Bush at doug@indental.org, mailed to IDA, 550 West North St, Suite 300, Indianapolis, IN 46202.

Questions?
Please contact Doug Bush at doug@indental.org.