**Speaker of the House of Delegates
Curriculum Vitae Form**



**211 E. Chicago Avenue**

**Chicago, IL 60611**

The ADA Speaker of the House of Delegates Curriculum Vitae Form should be completed in its entirety. If additional space is required, attach extra pages with the same section titles and in the same order. Although it is permissible to attach an existing curriculum vitae, the use of “see attached CV” in any section is discouraged. In accordance with the *Election Commission Rules Governing the Conduct of Campaigns*

*for All ADA Elective Officers,* this document may be electronically distributed to the members of the House of Delegates.

*11/2021*

**NAME:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **PERSONAL INFORMATION** |
| Office Address: | Phone: |
|  | Fax: |
|  | Email: |
| Home Address: | Phone: |
|  | Fax: |
|  | Email: |

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| **EDUCATION** | **Year** | **Degree** |
| College: |  |  |  |
| Dental School: |  |  |  |
| Dental Specialty Training: |  |  |  |
| Other: |  |  |  |

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| **LICENSURE** | **State** | **Year** |
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| **ACADEMIC or PROFESSIONAL APPOINTMENTS (Location)** | **Rank** | **Years(s)** |
| Teaching |
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| Research |
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| **PROFESSIONAL SOCIETY MEMBERSHIPS (excluding ADA)** | **Offices Held** |
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| **DENTAL PRACTICE (location)** | **Date** |
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| **HONORS and AWARDS** |
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| **COMMITTEES – DENTAL ORGANIZATIONS (including ADA)** | **Date** |
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| **OFFICES HELD – DENTAL ORGANIZATIONS (including ADA)** | **Date** |
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| **PRESIDING or PARLIAMENTARY PRESENTATIONS (list five most recent)** |
| **Topic** | **Society** | **Date** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
| 5. |  |  |  |

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| **LEADERSHIP or PARLIAMENTARY ARTICLES PUBLISHED (list three most recent)** |
| 1. |
| 2. |
| 3. |

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| **WORKSHOPS ATTENDED ON PARLIAMENTARY PROCEDURE** | **Date** |
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| **Describe your background (statement of qualifications) in presiding experience and any service in roles such as: Parliamentarian, teaching parliamentary procedures, or any other position(s) providing comparable experience.** |
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| **Why do you want to be ADA Speaker? What do you hope to accomplish?** |
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