

Student Delegate Application

All applications are due to your ADHA District Director no later than February 10, 2024.

| Are | you a student member of the American Dental Hygienists' Association? | 🗌 Yes | |
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ADHA Member ID:

Name:

Address:

Phone:

Email:

Expected Graduation Date:

Name of Institution:

Essay

Please submit an essay with the completed application answering the question below. The essay must be 250 words or less. Please do not include identifying information including your name, the name of your dental hygiene program, or your city/state.

What professional skills do you believe you will obtain through Student Membership and participation in ADHA?



Program Director Verification Section

Please review the qualifications for Student Delegate and complete the section below. This form must be completed before submitting the application. A certified signature or written signature approval from your Program Director will be accepted.

Qualifications

- Must be a student member of the American Dental Hygienists' Association.
- Must be a matriculating dental hygiene student with a minimum of one semester/trimester remaining after annual session.
- Must be in good standing in a dental hygiene program and have the written approval of the program director for candidacy.
- Must be available to fulfill all obligations of a district workshop and full attendance at the ADHA House of Delegates Meeting (June 28-30, 2024).

| I certify that | meets | the | above | qualifications | for | the | student |
|--------------------------------------------|----------|-------|---------|----------------|-----|-----|---------|
| delegate to the American Dental Hygienists | ' Associ | atior | n House | of Delegates. | | | |

Print Name: Program Director

Signature: Program Director Date:

Name of Institution:

Application Checklist:

Completed Application Essay Program Director Verification

I understand that I must complete the student delegate essay question independently of external assistance. I also understand that the duties of district student delegate include but are not limited to becoming familiar with the Annual Report and Delegates' Manual, attendance at a district workshop and attendance at all House of Delegate meetings. I promise to fulfill all these obligations.

Applicant Full Name:

Applicant Signature:

American Dental Hygienists' Association District Directors

District I Director Carmen Negron-Dupee, BSFCS, RDH CarmenN@adha.net

Maine DHA Massachusetts DHA New Hampshire DHA Rhode Island DHA Vermont DHA

District II Director Carolynn Wahl, RDH, BSDH, PHDHP, FADHA CarolynnW@adha.net

Connecticut DHA New Jersey DHA New York State DHA Pennsylvania DHA

District III Director Sheri Moore, RDH, BSHS, FADHA SheriM@adha.net

Delaware DHA District of Columbia Maryland DHA Virginia DHA West Virginia DHA

District IV Director Renee Spencer, RDH, FADHA ReneeS@adha.net

Florida DHA Georgia DHA North Carolina DHA South Carolina DHA District V Director Jerelyn Smith, RDH, FADHA JerelynS@adha.net

Indiana DHA Kentucky DHA Michigan DHA Ohio DHA

District VI Director Claire Vann, RDH, BSDH, MS, FADHA ClaireV@adha.net

Alabama Arkansas DHA Louisiana DHA Mississippi DHA Tennessee DHA

District VII Director Carissa Regnerus, RDH, MA, FADHA CarissaR@adha.net

Minnesota DHA North Dakota South Dakota DHA Wisconsin DHA

District VIII Director Christina Emmert, RDH, PRP, FADHA ChristinaEr@adha.net

Illinois DHA Iowa DHA Kansas DHA Missouri DHA Nebraska DHA District IX Director Joanna Allaire, RDH, BSDH, MDH JoannaA@adha.net

Oklahoma DHA New Mexico DHA Texas DHA

District X Director Cara Reck, RDH, BS, LAP, FADHA CaraR@adha.net

Colorado DHA Montana DHA Utah DHA Wyoming DHA

District XI Director Pamela Larrabee, RDH, BAS, MA PamelaL@adha.net

Alaska DHA Arizona DHA California Hawaii DHA Idaho DHA Nevada DHA Oregon DHA Washington State DHA

Application Timeline

All applications are due to your ADHA District Director no later than February 10, 2024.

Selection results will be confirmed by March 8, 2024. Your ADHA District Director will announce the names of the dental hygiene student selected as student delegate.

Please contact ADHA at (312) 440-8900 or **Student.Relations@adha.net** if you have questions regarding the application or the position.