

**2023 Application to Nominate for Elective Office of the KDA** (PLEASE PRINT)

Find Application Packet documents at [KDA | Kentucky Dental Association \(kyda.org\)](https://kyda.org)

Full Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Number \_\_\_\_\_ Email \_\_\_\_\_

KDA Component Society \_\_\_\_\_

**Please check the 2023 elective position for which you are applying:**

☐ First Vice President

☐ Second Vice President

☐ Secretary-Treasurer

☐ Delegate to the ADA – 2024 #1

☐ Alternate Delegate to the ADA – 2024 #2

List offices held in ADA/KDA/Component Society

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List other highlights from your Curriculum Vita

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