

APPLICATION FORM



First name: _____ Last name: _____

ODHA membership #: _____ School graduated from: _____

Employer name (if applicable): _____ Employer city: _____

Mailing address: _____

Email: _____ Phone: _____

APPLICATION QUESTIONS

1) Please tell us about any experience you have with volunteering or holding a leadership position.

2) Please briefly describe the qualities that demonstrate your leadership and/or mentorship abilities.

3) In your opinion, what are the top two challenges faced by new graduates of dental hygiene programs?

POSITION AGREEMENT

Members of the ODHA's New Grad Advisory Panel play a key role in driving the association's initiatives to support new and recent graduates of dental hygiene programs. Advisory panel members will meet virtually **approximately two to three times per year** and will work with ODHA staff to:

- Review the association's existing resources for recent graduates and provide input on new resources;
- assist in identifying trends and areas of concern and/or interest for dental hygiene students and recent graduates;
- provide input on networking and communication opportunities for new graduates; and
- help to drive student and recent graduate engagement with ODHA's new graduate-focused content by interacting with ODHA posts on approved communication and networking platforms

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I understand the New Grad Advisory Panel member obligations and agree to fulfill them.

SIGNATURE

Applicant signature: _____ Date: _____

Please save a copy of your completed application form and submit it by email to:

Emily Bain at
ebain@odha.on.ca