

Page: Supporting Evidence & Documentation

Curriculum Vitae (CV) or Resumé *

Please upload a complete Curriculum Vitae (CV) or Resumé which outlines academic education, years of experience in occupational therapy, professional accomplishments, and organizational involvement. Please submit as a DOC or PDF file format.

[File Upload]

Cover Letter *

Please upload a cover letter highlighting relevant qualifications, leadership skills, and competencies for this elected position. It is strongly suggested that you review the standard operating procedure (SOP) or job description (JD) of the position in advance. Please submit as a DOC or PDF file format.

[File Upload]

Page: Applicant Interest and Experience

Assembly of Student Delegates: Experience *

Describe how your professional, personal life, or volunteer experiences are a fit for the role you are seeking.

Instructions: Please respond in 150 words or less.

Assembly of Student Delegates: DEI *

Why do you believe diversity, equity, and inclusion are essential to the occupational therapy profession and AOTA as an organization and how will this influence your volunteer role?

Instructions: Please respond in 150 words or less.

Assembly of Student Delegates: Project *

What project or initiative are you most proud of? Explain your rationale and highlight project or initiative outcomes. Were there any obstacles that made you have to pivot?

Instructions: Please respond in 150 words or less.

Page: Prior Professional & Volunteer Experience

Has the nominee ever not completed a professional volunteer commitment? *

Select one option

- Yes
- No

If yes, please explain.

Does the nominee have any potential conflicts of interest or other concerns that should be brought to the attention of the Volunteer Leadership Development Committee (VLDC)? *

Select one option

- Yes
- No

If yes, please explain.

Is the applicant/nominee currently engaged in any volunteer or paid positions with a state association or affiliate board, NBCOT®, state regulatory board, or ACOTE®/RAE, the term(s) of which would continue once the term for this position begins? *

Select one option

- Yes
- No

If yes, please explain.

Has the nominee ever had a public sanction from the Ethics Commission or any other Association body? *

Select one option

- Yes
- No

If yes, please explain.

Page: Student Background Information

OT Education *

Please list the name and address of the approved/accredited program in which you are currently enrolled as an entry-level student.

Current Grade Point Average (GPA) *

Expected Date of Graduation (Month/Year) *

Please indicate if any education requirements will occur post-graduation, e.g., coursework, fieldwork, and provide date for their completion.

Type of OT Degree *

Please check all that apply

Select one or more options

- OT
- OTA
- Master's
- Doctorate

Page: Student Statement of Authenticity

I attest to the accuracy of the information included in this nomination form. This includes, but is not limited to, information contained in the accompanying CV, resumé, or other submission materials. *

Select one or more options

- Yes
- No

E-Signature of Student Nominee *

Note: My electronic (typed) signature on this document constitutes my legal signature in accordance with 21 CFR Part 11: Electronic Records; Electronic Signatures Act.
