

Texas Leadership Institute Candidate Application Form

Deadline February 15, 2024

Instructions

For your application to be considered, the Texas Dental Association must receive your completed application form and two completed reference forms by February 15, 2024. Applications will be acknowledged when all three documents have been received. All applicants will be notified of their acceptance status by March 1, 2024.

Please complete all sections of this interactive form and return it via email to Lee Ann Johnson, Director of Member Services, at ljohnson@tda.org by February 15, 2024. Include "TLI Application" along with your name in the subject line. It is recommended that you follow up with a phone call to ensure receipt of your application.

If you have any questions about the Texas Leadership Institute, contact Lee Ann Johnson at 512-443-3675, extension 134.

Time Commitment

Applicants should be prepared to commit significant personal time to the Institute. The full-year program includes the following **mandatory** time commitments:

- Two, two-day, in-person sessions scheduled for April 12-13, 2024, and April 11-12, 2025.
- Monthly 90-minute weeknight webinars in June, July, August, September, November, January, February, and March.
- Developing and executing a leadership project to address an issue or challenge within their community, organization, or the profession of dentistry that also correlates to the TDA's Strategic Plan.
- Mentoring the 2025-2026 class of Institute participants.

_____ **IMPORTANT:** Initial here to indicate you agree to the mandatory time commitment.

Section 1: Contact Information

Please provide your preferred contact information below. This will be used for all Institute and all TDA correspondence.

Name *(First, Middle, Last)*

Street Address *(No PO Box)*

Suite

City/Town

State

Zip/Postal Code

Email Address

Phone Number

Cell Phone Number

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Are you a current TDA member? *(TDA membership is required for participation.)*

Yes No

ADA Member Number *(000-00-0000)*

Section 2: Demographic Information

Gender

Male Female Non-binary

Race/Ethnicity:

African American

Native Hawaiian or Other Pacific Islander

Hispanic/Latino

White

Asian

Other

American Indian or Alaska Native

Date of Birth *(mm/dd/yyyy)*

Section 3: Education and License

(Participation is open to all active, licensed TDA member dentists, residing in the U.S.)

Predoctoral Dental Education

Dental Degree

D.M.D. D.D.S. Other

Dental School

Other Dental School

Graduation Date *(month, year)*

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Advanced Dental Education

Type of Program

Other Type of Program

Completion Date *(month, year)*

Type of Award

Type of Practice *(Check all that apply.)*

General Practice

Endodontics

Oral Pathology

Periodontics

Prosthodontics

Oral Radiology

Pediatric Dentistry

Orthodontics

Oral Surgery

Dental Industry

Dental Education

Dental Public Health

Other, please specify

Please indicate the state or states in which you are licensed and any specialty license information, if applicable.

	State	Specialty
1.		
2.		
3.		
4.		
5.		

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Section 4.1: Employment Experience

Please list your employment experience, with most recent experience first. Dates should be entered in month/year format. If you are still employed at any location, leave the “date ended” field blank.

	Place of Employment	Position	Date Started	Date Ended
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

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Section 4.2: Memberships, Leadership and Volunteer Positions

Please list current or past memberships in professional and civic organizations, including any leadership/volunteer positions, recognitions and dates. Dates should be entered in month/year format.

	Memberships, Leadership and Volunteer Positions	Positions and Recognitions	Date Started	Date Ended
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

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Section 5: Essays

Please answer the three essay questions that follow in the space provided (approximately 500 words or less for each essay question).

1. Please share your reasons for participating in the Texas Leadership Institute. What are your strengths as a leader and what leadership skills do you want to develop further? After completing the program, what kinds of leadership/volunteer roles would you hope to fill with dental associations, other associations, community organizations or other organizations?

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2. Please describe a situation or project where you demonstrated your talent or promise as a leader. Please include information on results and lessons learned.

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3. Please discuss an issue of social or political concern that impacts the dental profession or your community. Why is this issue important and what could be done to resolve the issue at the local, state or national levels? Would you consider pursuing a leadership project in this area through the Texas Leadership Institute?

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Section 6: References

Please list the name and email address of two individuals who will provide a reference in support of your application. The Candidate Reference Form is available at tda.org. Download the form and forward it to each person submitting a reference on your behalf. They must complete and submit the form on your behalf no later than February 15, 2024, for your application to be considered.

References

	First Name	Last Name	Email Address
1.			
2.			

Describe how long you have known each reference listed above and under what circumstances. Be specific.

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Section 8: Applicant Agreement

I hereby apply as a candidate in the Texas Leadership Institute. If chosen to participate, I agree to commit the time necessary for successful completion of the program, including attendance both in-person sessions of the program (April 12-13, 2024 and April 11-12, 2025), monthly video conference calls and mentoring future class participants. I acknowledge that all the information contained herein is accurate and true to the best of my knowledge.

If selected, as part of my participation in the Texas Leadership Institute, I hereby grant to the TDA, their agents, partners, sponsors and designees, all rights and permission to use and reproduce my name, likeness (including my photograph), biographic information (including professional credentials) and any statements I make in connection with the program, in any media now existing or hereafter created, for research, education, promotional and marketing purposes. I hereby release and discharge for myself and my heirs, executors, administrators and assigns the TDA, their officers, directors, employees and agents, from any and all claims and demands arising out of or in connection with the exercise of this grant.

I have read the statements above and by signing below I agree.

Name	(First)	(Last)	Date (mm/dd/yyyy)
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Thank you for your interest in the Texas Leadership Institute program. **Please email your completed application to ljohnson@tda.org by February 15, 2024. Include “Institute Application” and your name in the subject line.**

In order for your application to be considered, the TDA must receive your completed application form and two completed reference forms by February 15, 2024. Applications will be acknowledged when all three documents have been received.

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