2014 ADEA HOUSE OF DELEGATES MANUAL

- MEMBERS OF THE 2014 ADEA HOUSE OF DELEGATES
- INTRODUCTION TO THE ADEA GOVERNING PROCESS
- RESOLUTIONS FOR CONSIDERATION BY THE 2014 ADEA HOUSE OF DELEGATES
- ADEA BYLAWS
2014 ADEA
House of Delegates Manual
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Schedule of the 2014 ADEA House of Delegates

Opening Session of the ADEA House of Delegates
Saturday, March 15, 2014, 4:30 – 5:30 p.m., Henry B. Gonzalez Convention Center Ballroom C1.

Voting for Chair-elect of the ADEA Board of Directors
Sunday, March 16, ballots may be cast between the hours of 8:00 a.m. and 5:00 p.m. at the ADEA House of Delegates booth in the registration area at the Henry B. Gonzalez Convention Center.

Monday, March 17, ballots may be cast between the hours of 8:00 a.m. and 4:30 p.m. at the ADEA House of Delegates booth in the registration area at the Henry B. Gonzalez Convention Center.

ADEA Reference Committee Hearings
Association Policy Reference Committee Hearing
Sunday, March 16, 1:30 – 2:30 p.m., Henry B. Gonzalez Convention Center 217 C

Association Administrative Affairs Reference Committee Hearing
Sunday, March 16, 3:30 – 4:30 p.m., Henry B. Gonzalez Convention Center 217 C

Closing Session of the ADEA House of Delegates
Tuesday, March 18, 2014, 3:30 – 4:30 p.m., Henry B. Gonzalez Convention Center Ballroom C1.

For the order of business of each session of the House, please see the section on “Order of Business of the ADEA House of Delegates” on page 28. For the names of the members of the Reference Committees and the resolutions assigned to them, please see pages 26-27.
**Members of the 2014 ADEA House of Delegates**

**ADEA Board of Directors**

Dr. Stephen Young, Chair of the Board of Directors, University of Oklahoma College of Dentistry  
Dr. Lily Garcia, Chair-elect of the Board of Directors, The University of Iowa College of Dentistry & Dental Clinics  
Dr. Gerald Glickman, Immediate Past Chair of the Board of Directors, Texas A&M University Baylor College of Dentistry  
Dr. Ryan T. Hajek, Board Director for Students, Residents and Fellows, University of Nebraska Medical Center College of Dentistry  
Dr. Pamela Hughes, Board Director for Hospitals and Advanced Education Programs, University of Minnesota School of Dentistry  
Dr. Susan H. Kass, Board Director for Allied Dental Program Directors, Miami Dade College  
Dr. Michael Landers, Board Director for Sections, Case Western Reserve University School of Dental Medicine  
Dr. Valerie Murrah, Board Director for Faculties, University of North Carolina at Chapel Hill School of Dentistry  
Dr. Elizabeth Roberts, Board Director for the Corporate Council, Johnson & Johnson Healthcare Products, Division of McNeil-PPC, Inc.  
Dr. Huw F. Thomas, Board Director for Deans, Tufts University School of Dental Medicine  
Dr. Richard Valachovic, President and CEO, American Dental Education Association

**ADEA Council of Allied Dental Program Directors**

**Administrative Board**

Chair, Dr. Vickie Kimbrough-Walls, Southwestern College Higher Education Center at National City  
Chair-elect, Prof. Kim Isringhausen, Virginia Commonwealth University School of Dentistry  
Secretary, Prof. Sharon Peterson, College of Southern Nevada  
Member-at-Large, Prof. Michele Carr, The Ohio State University College of Dentistry

**Additional Delegates, Dental Hygiene**

Dr. Linda Boyd, Forsyth School of Dental Hygiene  
Prof. Carole Brew, College of Southern Nevada  
Prof. Ann Brunick, University of South Dakota  
Dr. Susan Daniel, Old Dominion University College of Health Sciences  
Dr. Kathleen J. D'Ambris, The Community College of Baltimore County  
Prof. Gwen Hlava, University of Nebraska Medical Center College of Dentistry  
Prof. Debbie Holexa, Mesa Community College  
Dr. Laura Joseph, Farmingdale State College  
Prof. Janet Kinney, University of Michigan School of Dentistry  
Prof. Marion C. Manski, University of Maryland School of Dentistry  
Prof. Lisa Maxwell, Indiana University School of Dentistry  
Prof. Michelle McGregor, Virginia Commonwealth University School of Dentistry  
Prof. Vickie P. Overman, University of North Carolina at Chapel Hill School of Dentistry  
Prof. Patricia Nunn, Texas Woman’s University  
Prof. Lisa J. Rowley, Pacific University School of Dental Health Science  
Prof. Phyllis Spragge, Foothill College
Prof. Rebecca Stolberg, Eastern Washington University
Prof. Ana Thompson, Georgia Regents University College of Dental Medicine
Prof. Cheryl M. Westphal Theil, New York University College of Dentistry
Prof. Rebecca Wilder, University of North Carolina at Chapel Hill School of Dentistry
Prof. Kristi Wilkins, Loma Linda University School of Dentistry

Additional Delegates, Dental Assisting
Prof. Carole Brew, College of Southern Nevada
Prof. Sandra Walker, Fayetteville Technical Community College

Additional Delegates, Dental Laboratory Technology

Additional Delegates, Advanced Programs

Prof. Karmen Aplanalp, College of Southern Nevada
Prof. Anne Gwozdek, University of Michigan School of Dentistry
Prof. Sharon Stull, Old Dominion University
Prof. Ann Wetmore, Eastern Washington University

ADEA Council of Deans

Administrative Board
Chair, Dr. R. Lamont MacNeil, University of Connecticut School of Dental Medicine
Chair-elect, Dr. Karen P. West, University of Nevada, Las Vegas, School of Dental Medicine
Secretary, Dr. Henry A. Gremillion, Louisiana State University Health New Orleans School of Dentistry
Member-at-Large, Dr. Leon A. Assael, University of Minnesota School of Dentistry

Additional Delegates
Dr. Mert N. Aksu, University of Detroit Mercy School of Dentistry
Dr. Noel J. Aymat, University of Puerto Rico School of Dental Medicine
Dr. Joel H. Berg, University of Washington School of Dentistry
Dr. Charles N. Bertolami, New York University College of Dentistry
Dr. Thomas W. Braun, University of Pittsburgh School of Dental Medicine
Dr. Greg Chadwick, East Carolina University School of Dental Medicine
Dr. Ronald J. Dailey, Loma Linda University School of Dentistry
Dr. Jack Dillenberg, Arizona School of Dentistry & Oral Health
Dr. William W. Dodge, University of Texas Health Science Center at San Antonio Dental School
Dr. R. Bruce Donoff, Harvard School of Dental Medicine
Dr. Rena D’Souza, University of Utah School of Dentistry
Dr. Cherae M. Farmer-Dixon, Meharry Medical College School of Dentistry
Dr. John D.B. Featherstone, University of California, San Francisco, School of Dentistry
Dr. Cecile A. Feldman, Rutgers School of Dental Medicine
Dr. David A. Felton, West Virginia University School of Dentistry
Dr. Patrick J. Ferrillo, Jr., University of the Pacific Arthur A. Dugoni School of Dentistry
Dr. Steven W. Friedrichsen, Western University of Health Sciences College of Dental Medicine
Dr. Russell O. Gilpatrick, Midwestern University College of Dental Medicine-Arizona
Dr. Michael Glick, University at Buffalo School of Dental Medicine
Dr. Jerold S. Goldberg, Case Western Reserve University School of Dental Medicine
Dr. Christopher G. Halliday, Missouri School of Dentistry & Oral Health
Dr. Robert F. Hirsch, Lake Erie College of Osteopathic Medicine School of Dental Medicine
Dr. Timothy L. Hottel, University of Tennessee Health Science Center College of Dentistry
Dr. Jeffrey W. Hutter, Boston University Henry M. Goldman School of Dental Medicine
Dr. Amid I. Ismail, The Maurice H. Kornberg School of Dentistry, Temple University
Dr. David C. Johnsen, The University of Iowa College of Dentistry & Dental Clinics
Dr. Denise K. Kassebaum, The University of Colorado School of Dental Medicine
Dr. Denis F. Kinane, University of Pennsylvania School of Dental Medicine
Dr. G. William Knight, University of Illinois at Chicago College of Dentistry
Dr. James J. Koebel, University of New England College of Dental Medicine
Dr. Mark A. Latta, Creighton University School of Dentistry
Dr. Carol A. Lefebvre, Georgia Regents University College of Dental Medicine
Dr. Frank W. Licari, Roseman University of Health Sciences College of Dental Medicine – South Jordan, Utah
Dr. Patrick M. Lloyd, The Ohio State University College of Dentistry
Dr. William K. Lobb, Marquette University School of Dentistry
Dr. Lex MacNeil, Midwestern University College of Dental Medicine-Illinois
Dr. Phillip T. Marucha, Oregon Health & Science University School of Dentistry
Dr. Laurie K. McCauley, University of Michigan School of Dentistry
Dr. Linda C. Niessen, Nova Southeastern University College of Dental Medicine
Dr. No-Hee Park, University of California, Los Angeles, School of Dentistry
Dr. Marsha A. Pyle, University of Missouri - Kansas City School of Dentistry
Dr. Michael S. Reddy, University of Alabama at Birmingham School of Dentistry
Dr. Gary W. Reeves, University of Mississippi Medical Center School of Dentistry
Dr. John W. Reinhardt, University of Nebraska Medical Center College of Dentistry
Dr. Mark Allan Reynolds, University of Maryland School of Dentistry
Dr. Boyd E. Robinson, University of Florida College of Dentistry
Dr. Bruce E. Rotter, Southern Illinois University School of Dental Medicine
Dr. Leo E. Rouse, Howard University College of Dentistry
Dr. Avishai Sadan, Ostrow School of Dentistry of the University of Southern California
Dr. John J. Sanders, Medical University of South Carolina James B. Edwards College of Dental Medicine
Dr. David C. Sarrett, Virginia Commonwealth University School of Dentistry
Dr. John J. Sauk, University of Louisville School of Dentistry
Dr. Christian S. Stohler, Columbia University College of Dental Medicine
Dr. Mary Truhlar, Stony Brook University School of Dental Medicine
Dr. Sharon F. Turner, University of Kentucky College of Dentistry
Dr. John A. Valenza, The University of Texas School of Dentistry at Houston
Dr. Jane A. Weintraub, University of North Carolina at Chapel Hill School of Dentistry
Dr. John N. Williams, Indiana University School of Dentistry
Dr. Lawrence E. Wolinsky, Texas A&M University Baylor College of Dentistry

Additional Delegates, Nonhospital Based Advanced Dental Education Programs
Dr. Eli Eliav, University of Rochester Medical Center
Dr. Steven H. Rose, Mayo School of Graduate Medical Education
Dr. Philip P. Stashenko, The Forsyth Institute
Dr. John F. Hatton, Saint Louis University, The Center for Advanced Dental Education

Additional Delegates, Federal Dental Service Programs
Dr. Patricia E. Arola, United States Department of Veterans Affairs
RADM William Bailey, U.S. Public Health Service
Commander Gerard Bailey, U.S. Air Force Dental Service
Col. Drew Wayne Fallis, U.S. Air Force Dental Service  
Col. Priscilla H. Hamilton, U. S. Army Dental Corp  
Cpt. Glenn A. Munro, Naval Postgraduate Dental School  
Dr. Patrick D. Sculley, Uniformed Services University of the Health Sciences  
RADM Elaine Wagner, U.S. Navy Dental Corps  
Major General M. Ted Wong, U.S. Army Dental Corps

Additional Delegates, Association of Canadian Faculties of Dentistry  
Dr. Daniel A. Haas, University of Toronto Faculty of Dentistry

ADEA Council of Faculties

Administrative Board  
Chair, Dr. Nereyda Clark, University of Florida College of Dentistry  
Chair-elect, Dr. R. Todd Watkins, East Carolina University School of Dental Medicine  
Secretary, Dr. Lisa Mruz, University at Buffalo School of Dental Medicine  
Member-at-Large, Dr. Ryan Quock, The University of Texas School of Dentistry at Houston

Additional Delegates  
Dr. Robert Alder, Roseman University of Health Sciences College of Dental Medicine – South Jordan, Utah  
Dr. Mary Anne Baechle, Virginia Commonwealth University School of Dentistry  
Dr. Douglas M. Barnes, University of Maryland School of Dentistry  
Dr. Laura Caroline Barritt, Creighton University School of Dentistry  
Dr. Michael L. Bates, Louisiana State University Health New Orleans School of Dentistry  
Dr. Yaara Yaron Berdan, Ostrow School of Dentistry of the University of Southern California  
Dr. Carol A. Bibb, University of California, Los Angeles School of Dentistry  
Dr. Richard S. Callan, Georgia Regents University College of Dental Medicine  
Dr. Susan M. Chialastri, The Maurice H. Kornberg School of Dentistry, Temple University  
Dr. T. Madelyn Coar, University of Alabama at Birmingham School of Dentistry  
Dr. John D. Da Silva, Harvard School of Dental Medicine  
Dr. Joseph A. D’Ambrosio, University of Connecticut School of Dental Medicine  
Dr. Michael A. Dobos, University of Pittsburgh School of Dental Medicine  
Dr. Evelyn Donate-Bartfield, Marquette University School of Dentistry  
Dr. Alison French Doubleday, University of Illinois at Chicago School of Dentistry  
Dr. Vicky Evangelidis-Sakellson, Columbia University College of Dental Medicine  
Dr. Fred J. Fendler, University of the Pacific Arthur A. Dugoni School of Dentistry  
Dr. Kim E. Fenesy, Rutgers School of Dental Medicine  
Dr. Ronald E. Forde, Loma Linda University School of Dentistry  
Dr. Robert Quinn Frazer, University of Kentucky College of Dentistry  
Dr. Cheryl Elise Stanback Fryer, Howard University College of Dentistry  
Dr. Lora D. Graves, West Virginia University School of Dentistry  
Dr. John F. Guarante, Boston University Henry M. Goldman School of Dental Medicine  
Dr. Uri Hangorsky, University of Pennsylvania School of Dental Medicine  
Dr. Jessica Hinz, Southern Illinois University School of Dental Medicine  
Dr. Jean M. Iannadrea, Case Western Reserve University School of Dental Medicine  
Dr. Nancy L. Jacobsen, University of Oklahoma College of Dentistry  
Dr. Bernard Aaron Karshmer, The University of Colorado School of Dental Medicine  
Dr. Nahid Kashani, University of Detroit Mercy School of Dentistry  
Dr. Gail Ann Krishnan, University of Michigan School of Dentistry  
Dr. Allan J. Kucine, Stony Brook University School of Dental Medicine  
Dr. Tawana K. Lee Ware, Meharry Medical College School of Dentistry
Dr. James R. Lott, University of Mississippi Medical Center School of Dentistry
Dr. Gary Lowder, University of Utah School of Dentistry
Dr. Jose R. Matos, University of Puerto Rico School of Dental Medicine
Prof. Melinda L. Meadows, Indiana University School of Dentistry
Dr. Norma Olvera, University of Texas Health Science Center at San Antonio Dental School
Dr. Ivy D. Peltz, New York University College of Dentistry
Dr. Elizabeth S. Pilcher, Medical University of South Carolina James B. Edwards College of Dental Medicine
Dr. Frank A. Roberts, University of Washington School of Dentistry
Dr. David D. Rolf II, Midwestern University College of Dental Medicine-Arizona
Dr. Sophia Saeed, University of California, San Francisco, School of Dentistry
Dr. Mark S. Schweizer, Nova Southeastern University College of Dental Medicine
Dr. Stephen K. Shuman, University of Minnesota School of Dentistry
Dr. Robert D. Spears, Texas A&M University Baylor College of Dentistry
Dr. Ivy D. Peltz, New York University College of Dentistry
Dr. David D. Rolf II, Midwestern University College of Dental Medicine-Arizona
Dr. Sophia Saeed, University of California, San Francisco, School of Dentistry
Dr. Mark S. Schweizer, Nova Southeastern University College of Dental Medicine
Dr. Stephen K. Shuman, University of Minnesota School of Dentistry
Dr. Robert D. Spears, Texas A&M University Baylor College of Dentistry
Dr. Ivy D. Peltz, New York University College of Dentistry
Dr. David D. Rolf II, Midwestern University College of Dental Medicine-Arizona
Dr. Sophia Saeed, University of California, San Francisco, School of Dentistry
Dr. Mark S. Schweizer, Nova Southeastern University College of Dental Medicine
Dr. Stephen K. Shuman, University of Minnesota School of Dentistry
Dr. Robert D. Spears, Texas A&M University Baylor College of Dentistry

A ADEA Council of Sections

Administrative Board
Chair, Dr. Joan E. Kowolik, Indiana University School of Dentistry
Chair-elect, Dr. Keith A. Mays, East Carolina University School of Dental Medicine
Secretary, Dr. Mark S. Wolff, New York University College of Dentistry
Member-at-Large, Dr. Elaine L. Davis, University at Buffalo School of Dental Medicine

Additional Delegates

Academic Affairs
Chair, Dr. Nader A. Nadershahi, University of the Pacific Arthur A. Dugoni School of Dentistry
Councilor, Dr. Leslie Roeder, The University of Texas School of Dentistry at Houston

Anatomical Sciences
Chair, Dr. Michelle Wheater, University of Detroit Mercy School of Dentistry
Councilor, Dr. H. Wayne Lambert, West Virginia University School of Dentistry

Behavioral Sciences
Chair, Dr. Joan Maria Doris, University at Buffalo School of Dental Medicine
Councilor, Dr. Stuart M. Schrader, Indiana University School of Dentistry
Biochemistry, Nutrition and Microbiology
Chair, Dr. Larry D. Crouch, University of Nebraska Medical Center College of Dentistry
Councilor, Dr. Carole A. Palmer, Tufts University School of Dental Medicine

Business and Financial Administration
Chair, Ms. Eileen J. Collins, University at Buffalo School of Dental Medicine
Councilor, Mr. Scott K. Arneson, The University of Iowa College of Dentistry & Dental Clinics

Cariology
Chair, Dr. Spomenka Djordjevic, University of California, San Francisco, School of Dentistry
Councilor, Dr. Margherita R. Fontana, University of Michigan School of Dentistry

Clinic Administration
Chair, Ms. Sandra L. Phillips, University of Washington School of Dentistry
Councilor, Dr. Wilbert H. Milligan, III, University of Pittsburgh School of Dental Medicine

Clinical Simulation
Chair, Dr. Josephine Lomangino-Cheung, New York University College of Dentistry
Councilor, Dr. Kenneth L. Allen, New York University College of Dentistry

Community and Preventive Dentistry
Chair, Dr. David P. Cappelli, University of Texas Health Science Center at San Antonio Dental School
Councilor, Ms. Christine Ernst Miller, University of the Pacific Arthur A. Dugoni School of Dentistry

Comprehensive Care and General Dentistry
Chair, Dr. Ridley O’Dill Ross, University of Texas Health Science Center at San Antonio Dental School
Councilor, Dr. Joseph W. Parkinson, University of Kentucky College of Dentistry

Continuing Education
Chair, Dr. Jane Federipe Wright-Hayes, University of the Pacific Arthur A. Dugoni School of Dentistry
Councilor, Ms. Carol E. Trecek, Marquette University School of Dentistry

Dental Anatomy and Occlusion
Chair, Dr. Stanley Philip Freeman, Columbia University College of Dental Medicine
Councilor, Dr. Richard White, University of the Pacific Arthur A. Dugoni School of Dentistry

Dental Assisting Education
Chair, Ms. Madge Burgess Webster, University of North Carolina at Chapel Hill School of Dentistry
Councilor, Prof. Patricia Ann Capps, Indiana University School of Dentistry

Dental Hygiene Education
Chair, Dr. Joanna Asadoorian, University of Manitoba Faculty of Dentistry
Councilor, Prof. Joyce C Hudson, Ivy Tech Community College

Dental Informatics
Chair, Dr. Thankam P. Thyvalikakath, Indiana University School of Dentistry
Councilor, Dr. Elise S. Eisenberg, New York University College of Dentistry
Dental School Admissions Officers
Chair, Mr. Richard H Bigham, University of Missouri-Kansas City
Councilor, Dr. Venita J. Sposetti, University of Florida College of Dentistry

Development, Alumni Affairs and PR
Chair, Ms. Denean Paulik, New York University College of Dentistry
Councilor, Mr. William O. Butler, University of Texas Health Science Center at San Antonio Dental School

Educational Research, Development and Curriculum
Chair, Dr. Maureen McAndrew, New York University College of Dentistry
Councilor, Prof. Gail Schneider Childs, University of Florida College of Dentistry

Endodontics
Chair, Dr. Laurie R. Fleisher, New York University College of Dentistry
Councilor, Dr. Bruce Cary Justman, The University of Iowa College of Dentistry & Dental Clinics

Gay Straight Alliance
Chair, Dr. John D. Da Silva, Harvard School of Dental Medicine
Councilor, Dr. Frederick G. More, New York University College of Dentistry

Gerontology and Geriatrics Education
Chair, Dr. Helena Tapia-Perdigon, Texas A&M University Baylor College of Dentistry
Councilor, Dr. Georgia Dounis, University of Nevada, Las Vegas, School of Dental Medicine

Graduate and Postgraduate Education
Chair, Dr. James R. Winkler, University of Detroit Mercy School of Dentistry
Councilor, Dr. Kathy L. Marshall, Howard University College of Dentistry

Minority Affairs
Chair, Ms. Sandra C. Bolivar, Ostrow School of Dentistry of the University of Southern California
Councilor, Dr. Mildred A. McClain, University of Nevada, Las Vegas, School of Dental Medicine

Oral and Maxillofacial Pathology
Chair, Dr. Mohammed Nadimul Islam, University of Florida College of Dentistry
Councilor, Dr. J. Craig Whitt, University of Missouri - Kansas City

Oral and Maxillofacial Radiology
Chair, Dr. Vandana Kumar, University of Missouri - Kansas City
Councilor, Dr. Jahanzeb Chaudhry, The Ohio State University College of Dentistry

Oral and Maxillofacial Surgery Anesthesia Hospital Dentistry
Chair, Dr. Gregory M. Ness, The Ohio State University College of Dentistry
Councilor, Dr. Jeffrey D. Bennett, Indiana University School of Dentistry

Operative Dentistry and Biomaterials
Chair, Dr. Ana Elashvili, The University of Colorado School of Dental Medicine
Councilor, Dr. Derek R. Williams, University of Missouri - Kansas City

Oral Biology
Oral Diagnosis Oral Medicine
Chair, Dr. Cheryl Krushinski, Indiana University School of Dentistry
Councilor, Dr. Samuel P. Nesbit, University of North Carolina at Chapel Hill School of Dentistry

Orthodontics
Chair, Dr. Onur Kadioglu, University of Oklahoma College of Dentistry
Councilor, Dr. Mitchell J. Lipp, New York University College of Dentistry

Pediatric Dentistry
Chair, Dr. Sahar Alrayyes, University of Illinois at Chicago College of Dentistry
Councilor, Dr. Carolyn F. G. Wilson, Texas A&M University Baylor College of Dentistry

Periodontics
Chair, Dr. Anthony L Neely, University of Detroit Mercy School of Dentistry
Councilor, Dr. Peter Michael Loomer, New York University College of Dentistry

Physiology, Pharmacology and Therapeutics
Chair, Dr. Sanjay Praveen Chand, University of Detroit Mercy School of Dentistry
Councilor, Dr. Ted D. Pate, The University of Texas School of Dentistry at Houston

Postdoctoral General Dentistry
Chair, Dr. Harold M. Livingston, University of Mississippi Medical Center School of Dentistry
Councilor, Lt. Col. Sheryl Lyn Kane, U.S. Air Force Dental Service

Practice Management
Chair, Dr. Larry J. Squire, The University of Iowa College of Dentistry & Dental Clinics
Councilor, Dr. David Owen Willis, University of Louisville School of Dentistry

Prosthodontics
Chair, Dr. Heather Conrad, University of Minnesota School of Dentistry
Councilor, Dr. Paul L. Richardson, Loma Linda University School of Dentistry

Substance Abuse, Addiction, and Tobacco Dependence Education
Chair, Prof. Margie Arnett, Loma Linda University School of Dentistry
Councilor, Prof. Joan M. Davis, Southern Illinois University Carbondale

Student Affairs and Financial Aid
Chair, Dr. Jeanette DeCastro, Rutgers School of Dental Medicine
Councilor, Dr. Hugh P. Pierpont, The University of Texas School of Dentistry at Houston

ADEA Council of Hospitals and Advanced Education Programs

Administrative Board
Chair, Dr. David Shafer, University of Connecticut School of Dental Medicine
Chair-elect, Dr. Martin Steed, Medical University of South Carolina James B. Edwards College of Dental Medicine
Secretary, Dr. Raymond Simmons, Monmouth Medical Center
Member-at-Large, Dr. Heidi Crow, University at Buffalo School of Dental Medicine
Additional Delegates
Dr. Abi O. Adewumi, University of Florida College of Dentistry
Dr. Jeffrey D. Bennett, Indiana University School of Dentistry
Dr. Heather J. Conrad, University of Minnesota School of Dentistry
Dr. Roberta Lynn Diehl, University of Florida College of Dentistry
Dr. Carla A. Evans, University of Illinois at Chicago College of Dentistry
Dr. Yong Hur, Tufts University School of Dental Medicine
Dr. Vincent J. Iacono, Stony Brook University School of Dental Medicine
Dr. Joe W. Krayer, Medical University of South Carolina James B. Edwards College of Dental Medicine
Dr. Alton G. McWhorter, Texas A&M University Baylor College of Dentistry
Dr. Yumi Ogata, Tufts University School of Dental Medicine
Dr. Woosung Sohn, Boston University Henry M. Goldman School of Dental Medicine
Dr. Bryan T. Tervo, The Ohio State University College of Dentistry

ADEA Council of Students, Residents and Fellows
Administrative Board
Chair, Ms. Rosalie Brao, University of California, San Francisco, School of Dentistry
Vice-chair, Ms. Adrienne Perry, Howard University College of Dentistry
Secretary, Mr. Chapin Densmore, Ostrow School of Dentistry of the University of Southern California
Member-at-Large, Ms. Carlie Brown, University of Oklahoma College of Dentistry

Predoctoral Dental Students-South Central
Mr. Michael Gerlach, Texas A&M University Baylor College of Dentistry
Mr. Clint Miller, Texas A&M University Baylor College of Dentistry

Predoctoral Dental Students-Pacific
Ms. Meredith Dugoni, Roseman University of Health Sciences College of Dental Medicine – South Jordan, Utah
Ms. Michelle Zin, Ostrow School of Dentistry of the University of Southern California

Predoctoral Dental Students-Ohio Valley
Ms. Diana Blau, University of Louisville School of Dentistry
Ms. Jennifer Barrett, University of Kentucky College of Dentistry

Predoctoral Dental Students-Northeast
Mr. Pooyan Refahi, Tufts University School of Dental Medicine
Mr. Andrew Soule-Hinds, Boston University Henry M. Goldman School of Dental Medicine

Predoctoral Dental Students-Southeast
Ms. Catherine Daniel, Medical University of South Carolina James B. Edwards College of Dental Medicine
Mr. Isaac Morton, East Carolina University School of Dental Medicine
Predoctoral Dental Students-Midwest
Ms. Erin Riley, University of Detroit Mercy School of Dentistry
Ms. Erica Jasa, University of Nebraska Medical Center College of Dentistry

Allied Representative, Dental Hygiene

Advanced Dental Education Students-Hospital Programs
Dr. Ngozi Okoh, Yale New Haven Hospital

Advanced Dental Education Students-Nonhospital Programs
Dr. Irina Dragan, Tufts University School of Dental Medicine

Allied Dental Students—Dental Hygiene
To be determined.

Allied Dental Students—Dental Assisting
To be determined.

Allied Dental Students—Dental Laboratory Technology
To be determined.

ADEA Corporate Council

Administrative Board
Chair, Mr. Harold S. (Buddy) Auten, Sirona Dental, Inc.
Chair-elect, Ms. Tammy Manns, Dental Services Group
Secretary, Mr. Desi Nuckolls, The Procter & Gamble Company
Member-at-Large, Ms. Susan Ferrante, A-dec
Introduction to the ADEA Governing Process

Introduction
The American Dental Education Association (ADEA) is incorporated as a District of Columbia nonprofit corporation and as such is subject to the District of Columbia Nonprofit Corporation Code. As established by its Articles of Incorporation, the purpose of the Association is to advance and support dental education, dental research and the dental health and education of the general public, and it is recognized by the Internal Revenue Service as a 501(c)(3) organization.

ADEA is run by its members and has a democratically based governmental structure. Below is a summary of the Association’s structure and its policymaking procedures.

How ADEA is Organized
It’s important to know how ADEA is organized in order to understand the Association’s policymaking procedures. Illustration 1 at the end of this section shows that ADEA is organized into four basic components: (1) the House of Delegates, e.g., the ADEA Governing Body; (2) the Board of Directors, the ADEA Executive Committee; (3) Councils and their administrative boards and (4) Sections.

ADEA House of Delegates
The ADEA House of Delegates is the Association’s governing (policymaking) body. It convenes twice at each ADEA Annual Session & Exhibition. The House of Delegates consists of the Board of Directors (see below) and all or some members of the Association’s seven councils. All members of the ADEA Councils of Deans and Faculties are delegates. The numbers of delegates from the ADEA Councils of Allied Dental Program Directors and Hospitals and Advanced Education Programs are based on percentages of those councils’ members. The number of delegates from the Council of Students, Residents and Fellows is comprised of the administrative board; 12 predoctoral students; four advanced dental education students, residents or fellows and six allied dental students. The number of Section delegates depends on the number of sections. The councilor and chair of each section serve as delegates. The Administrative Board of the ADEA Corporate Council serves as delegates.

ADEA Board of Directors
The Board of Directors is ADEA’s executive committee and is responsible for running the Association’s affairs between ADEA Annual Sessions. It has 11 members—Chair of the Board, Chair-elect of the Board, Immediate Past Chair of the Board, Board Directors for each of the seven Councils and the President and CEO. The Board of Directors can establish ad hoc interim Association policies, rules and regulations, provided that such policies are not in conflict with existing Association policy and Bylaws and are presented for review at the next Meeting of the House of Delegates.

ADEA Councils
Six of the Association’s seven councils represent different constituencies at ADEA Member Institutions. The seventh consists of the councilor and chair of each ADEA section (see below). Councils represent their constituencies in the Association and at its Member Institutions. They identify, initiate and oversee projects and reports of value to their members and other Association members. Councils may also participate in the Association’s policymaking process. When requested, they identify potential consultants to the Board of Directors and other groups.
All councils meet at the ADEA Annual Session, and some hold additional meetings between Annual Sessions.

The Council of Allied Dental Program Directors consists of the directors and administrators of dental hygiene, assisting and laboratory technology education programs conducted by Institutional/Affiliate Member Institutions. In addition, the council includes directors of advanced allied dental education programs at the post-entry level that lead to a baccalaureate or advanced degree at institutions that are not ADEA Institutional Members.

The Council of Deans consists of the dean of each Institutional and Provisional Member institution, the chief dental administrator of each Affiliate Member institution conducting non-hospital-based advanced dental education programs, the chief dental officer or administrator of each Affiliate Member federal dental service and the President of the Association of Canadian Faculties of Dentistry.

The Council of Faculties consists of one faculty member elected by the faculty of each Institutional and Provisional Member institution.

The Council of Hospitals and Advanced Education Programs includes faculty in Commission on Dental Accreditation-approved advanced dental education programs located in ADEA Member Institutions, Residents and Fellows in Commission on Dental Accreditation-approved advanced dental education programs located in ADEA Member Institutions and past members of the COHAEP Administrative Board who are appointed to or employed in an ADEA Member Institution.

The Council of Sections. Each Section consists of any Individual, Student, Affinity Member, Retired and Honorary ADEA member interested in the Section’s particular academic or administrative area. An ADEA member may join any number of Sections.

The Council of Students, Residents and Fellows consists of students, residents and fellows representing any of the following types of programs conducted by each Active, Provisional and Affiliate Member Institution: (a) students, residents and fellows in a program leading to the D.D.S. or D.M.D. degree; (b) students, residents and fellows enrolled in advanced dental education programs; (c) students, residents and fellows in dental hygiene education programs; (d) students, residents and fellows in dental assisting education programs and (e) students, residents and fellows in dental laboratory technology education programs.

The Corporate Council consists of the official representative of each Corporate Member.

Council Representation in the House of Delegates:

All members of the Council of Deans serve as delegates to the House of Delegates.

All members of the Council of Faculties serve as delegates to the House of Delegates. Members are elected or appointed by their institutions.

The Council of Allied Dental Program Directors delegates to the House of Delegates are nominated by members of the Council and approved by the Council’s Administrative Board. The Administrative Board also serves as delegates to the House of Delegates.

The Council of Hospitals and Advanced Education Programs delegates to the House of Delegates include representatives from the dental specialties who are nominated and reviewed by the Council’s Administrative Board. Delegates that represent programs may self-nominate or
are nominated by the Council’s Administrative Board. Delegates are appointed by the Council’s Administrative Board.

The Council of Sections delegates to the House of Delegates include the Councilor and Chair of each Section. The members of the Administrative Board also serve as delegates to the House of Delegates.

The Council of Students, Residents and Fellows elects delegates at the Annual Session & Exhibition. Each Member Institution represented at the Council meeting to elect delegates gets one vote.

The Corporate Council delegates to the House of Delegates consist of the Council’s Administrative Board.

**Council Administrative Boards**

Each council has a five-member administrative board, consisting of a Board Director (who is an Association officer who serves on the ADEA Board of Directors), a Chair, a Chair-elect (or Vice-chair in the Council of Students, Residents and Fellows), a Secretary and a Member-at-Large. Each administrative board meets at least once between Annual Sessions and is responsible for planning its council’s ADEA Annual Session & Exhibition program and for managing the council’s affairs. Administrative boards relate to their councils much as the Board of Directors relates to the House of Delegates.

**Sections**

Each ADEA Individual, Student, Affinity, Honorary or Retired Member may join any of the Association’s sections. Each section is concerned with a particular academic or administrative area. Individual members may attend the meetings of any sections but can participate in the business affairs of only those to which they belong. Each section has a Councilor, Chair, Chair-elect and Secretary. The section officers function much as the council administrative boards do, in that they plan their section’s ADEA Annual Session & Exhibition meetings and manage the section’s affairs between Annual Sessions.

**Standing and Special Committees**

The Board of Directors or the House of Delegates may appoint Standing and Special Committees to assist in performing its duties. Committees of the Board of Directors and House of Delegates shall have two or more directors or delegates, and directors must constitute a majority of committee membership. The Board of Directors may also appoint Advisory Committees. Task forces may include any Individual Member and do not require Director membership.
Figure 1: Organizational Structure of the American Dental Education Association

Substance Abuse, Addiction, and Tobacco Dependence
How Resolutions are Introduced and What Happens to Them

Resolutions are the vehicles by which the Association’s policies and administrative procedures are established, amended or deleted.

Procedures Regarding Resolutions

- Resolutions may be presented to the House of Delegates either by the Board of Directors or by any delegate in writing, up to and including the Opening of the House of Delegates.
- Any Individual Member may submit a resolution to the Board of Directors by December 1, prior to the next Annual Session & Exhibition, which in its discretion may or may not choose to forward it for further consideration.
- Resolutions not brought before the last Board of Directors meeting prior to the Annual Session & Exhibition may be introduced at the Opening of the House of Delegates and must be presented by a delegate.
- Resolutions brought after the Opening of the House of Delegates cannot be considered by the House until the following year. The resolution can be sent immediately after the Annual Session & Exhibition to the President and CEO, who then presents it to the Board of Directors for consideration before the next Annual Session & Exhibition.
- At its discretion, the Board of Directors may submit resolutions to an appropriate Association component group for advice before forwarding the resolution to the House of Delegates.
- Annually, the Board of Directors appoints Reference Committee Members to hold hearings at the Annual Session & Exhibition on resolutions being presented to the House of Delegates and to make recommendations on those resolutions upon request of the Board of Directors.
- Resolutions proposing expenditure of Association funds must be accompanied by a cost impact statement estimating the amount of funds required and the period of expenditure.
- Resolutions proposing changes in the ADEA policies and Bylaws must specify how the ADEA Policy Statements, Position Papers and Bylaws would be affected.

Staff will assist members in drafting resolutions and estimating expenditures.

Format of Resolution

Resolutions must follow a specific format. They should not be numbered because staff assigns numbers.

“Whereas” clauses should not be used. Instead, when necessary, a succinct background statement should precede the resolution.

The following fictitious statement and resolution exemplifies the format of an ADEA resolution.
Sample ADEA Resolution
Board of Directors Quorum

The present Bylaws of the American Dental Education Association provide that a majority of the members of the Board of Directors constitutes a quorum for the transaction of business. It is believed that the quorum requirements should be increased because it is presently possible for only six individuals to make important decisions affecting the Association. The following resolution is therefore presented for consideration.

Resolved, that the quorum requirement for the Board of Directors be increased from a majority of the members to two thirds of the members;

    and be it further

Resolved, that Bylaws Chapter IV (Board of Directors), Section E (Quorum), which reads:

    Section E. Quorum. A majority of the members constitutes a quorum for the transaction of business at regular or special sessions.

Be amended to read:

    Section E. Quorum. Two thirds of the members constitute a quorum for the transaction of business at regular or special sessions.
Figure 2: What Happens to Resolutions Introduced at Annual Session

What Happens to Resolutions Introduced at Annual Session

![Diagram showing the flow of resolutions]

What Can Happen to a Resolution Introduced Between Annual Sessions

![Diagram showing the flow of resolutions between annual sessions]
How ADEA Reference Committees Function

Purpose
Before each ADEA Annual Session & Exhibition, the ADEA Board of Directors appoints two Reference Committees, the ADEA Reference Committee on Association Administrative Affairs and the ADEA Reference Committee on Association Policy. Most resolutions to be considered by the ADEA House of Delegates are referred to one of these committees. Resolutions dealing with administrative, procedural, and business affairs of the Association are referred to the Reference Committee on Association Administrative Affairs. Resolutions dealing with the policies and public positions of ADEA are referred to the Reference Committee on Association Policy.

The Reference Committees hold hearings at the Annual Session, at which all individual members have an opportunity to discuss and debate the resolutions before they are considered by delegates at the Closing Session of the House. After their hearings, the Reference Committees write reports recommending specific actions on each resolution, and the reports are presented at the Closing Session of the House of Delegates.

Hearings
Hearings are open to all individual members and other ADEA Annual Session & Exhibition participants. Reference Committee chairs have the authority to determine whether a nonmember may speak.

At their hearings, each Reference Committee provides an opportunity for discussion on each resolution referred to it. A Reference Committee must recommend action to the House on each resolution, even if there is no discussion at the hearing. However, if there is no discussion, a Reference Committee need not necessarily recommend approval of a resolution; it can recommend another action. Reference Committees have considerable authority; they may recommend the adoption of a resolution, the rejection of a resolution, to amend and adopt the amended resolution or refer the resolution to the ADEA Board of Directors for further study. Action on a resolution cannot be postponed beyond the close of the 2014 House of Delegates. Each committee should, in its report, explain its recommendations briefly, noting the reasons for agreement or disagreement with the original recommendations.

A Reference Committee chair cannot permit motions or votes at hearings because Reference Committees are intended only to receive information and opinions. Further, a chair may not debate points, either at the hearing or the Closing Session of the House.

More
There is more on Reference Committees specific to the 2014 ADEA Annual Session & Exhibition in the next section.

Conclusion
We hope this information has given you a basic understanding of how ADEA works and has encouraged you to participate actively in the Association’s affairs. Please contact ADEA staff member Ms. Abigail Gorman or Ms. Sue Sandmeyer, at 202-289-7201 or at gormana@adea.org or sandmeyers@adea.org, for any further information you need.
ADEA Reference Committees

Additional information on Reference Committees appears in “Introduction to the ADEA Governing Process,” which immediately precedes this section. That material explains the purpose of Reference Committees and the ground rules governing their hearings at the ADEA Annual Session & Exhibition.

The ADEA Board of Directors has selected the following members to serve on this year’s Reference Committees:

**ADEA Reference Committee on Association Policy**

Chair, Dr. Nahid Kashani, University of Detroit Mercy School of Dentistry, ADEA Council of Faculties
Ms. Rosalie Brao, University of California, San Francisco School of Dentistry, ADEA Council of Students, Residents and Fellows
Prof. Patricia Capps, Indiana University School of Dentistry, ADEA Council of Sections
Dr. Henry Gremillion, Louisiana State University Health New Orleans School of Dentistry, ADEA Council of Deans
Dr. Vickie Kimbrough-Walls, Southwestern College: Higher Education Center at National City, ADEA Council of Allied Dental Program Directors
Ms. Tammy Manns, Dental Services Group, ADEA Corporate Council
Dr. Martin Steed, Medical University of South Carolina James B. Edwards College of Dental Medicine, ADEA Council of Hospitals and Advanced Education Programs

**ADEA Reference Committee on Association Administrative Affairs**

Chair, Dr. Madelyn Coar, University of Alabama at Birmingham School of Dentistry
Dr. Leon Assael, University of Minnesota School of Dentistry, ADEA Council of Deans
Dr. Laurie Fleisher, New York University College of Dentistry, ADEA Council of Sections
Mr. Desi Nuckolls, The Procter & Gamble Company, ADEA Corporate Council
Ms. Adrienne Perry, Howard University College of Dentistry, ADEA Council of Students, Residents and Fellows
Prof. Sharon Peterson, College of Southern Nevada, ADEA Council of Allied Dental Program Directors
Dr. Raymond Simmons, Monmouth Medical Center, ADEA Council of Hospitals and Advanced Education Programs

**ADEA Reference Committee Hearing Times and Locations**

Association Policy Reference Committee Hearing
Sunday, March 16, 1:30 to 2:30 p.m., Henry B. Gonzalez Convention Center, 217 C

Association Administrative Affairs Reference Committee Hearing
Sunday, March 16, 3:30 to 4:30 p.m., Henry B. Gonzalez Convention Center, 217 C
Resolutions to be Considered by the ADEA House of Delegates

While there are four (4) resolutions (1H-2014 through 4H-2014) that will be acted upon by the House at its Opening Session on Saturday, March 15, 2014, from 4:30 to 5:30 p.m., there are five (5) resolutions (5H-2014 through 9H-2014) that the Board of Directors has referred to hearings of Reference Committees. In addition, any resolutions introduced at the Opening Session of the House will also be referred to the appropriate Reference Committee.

After the Reference Committees have met on March 16, these five resolutions (and any that are presented from the floor) will be considered by the House at its Closing Session on Tuesday, March 18, from 3:30 to 4:30 p.m. At the Closing Session, the Reference Committees’ chairs will read the resolutions that their committees have heard, and their reports will be submitted to the House (but not read aloud).

Resolutions to be Heard by the ADEA Reference Committee on Association Policy

The Reference Committee on Association Policy will hear Resolution 5H-2014 on Sunday, March 16 from 1:30 to 2:30 p.m. Additional resolutions may be introduced at the Opening Session of the House and referred to this committee.

Resolutions to be Heard by the ADEA Reference Committee on Association Administrative Affairs

The Reference Committee on Administrative Affairs will hear Resolutions 6H-2014, 7H-2014, 8H-2014 and 9H-2014 on Sunday, March 16, from 3:30 to 4:30 p.m. Additional resolutions introduced at the Opening Session of the House may also be referred to this committee.
Order of Business of the ADEA House of Delegates

Opening Session
Saturday, March 15, 4:30 to 5:30 p.m., Call to Order—Chair of the ADEA Board of Directors, Dr. Stephen Young

- Report of Quorum
- Approval of the Minutes of the Previous Session
- Reports
- Chair of the Board-elect’s Address—Dr. Lily Garcia
- President and CEO’s Report—Dr. Richard Valachovic
- Report of the Nominating Committee—Dr. Gerald Glickman
- Referrals of Reports and Resolutions
- Recess, until March 18, 2014, 3:30 p.m.

Closing Session
Tuesday, March 18, 3:30 to 4:30 p.m., Call to Order—Chair of the ADEA Board of Directors, Dr. Stephen Young

- Report of Quorum
- Consideration of Reference Committee Reports and Action on Resolutions
- Unfinished Business
- New Business
- Chair of the ADEA Board of Director’s Address—Dr. Stephen Young
- Announcement of New Officers and Recognition of Retiring Officers
- Adjournment
Procedures for the Conduct of Business in the
ADEA House of Delegates

Alternates

Council members unable to attend a House of Delegates Meeting or a Council meeting, or who serve in the House of Delegates in two or more positions (e.g., as a member of the Council of Faculties and Council of Sections), may appoint alternates to represent them. Members of the Councils of Allied Dental Program Directors; Hospitals and Advanced Education Programs; and Students, Residents and Fellows must appoint alternates who are members of their Council. Members of the Council of Sections must appoint the Chair-elect or Secretary of their Section. Members of the Councils of Deans and Faculties must appoint individuals from their institutions. Delegates representing two or more Councils in the House of Delegates must decide which Council they wish to represent and then appoint an alternate(s) for the other Council(s) according to the foregoing guidelines. All alternates must be ADEA Individual Members. Corporate Council Administrative Board members unable to attend a House of Delegates Meeting may appoint alternates to represent them; such alternates must be members of the Corporate Council. All Council alternates to the House of Delegates must be selected prior to the ADEA Annual Session & Exhibition and be ratified by the appropriate Council prior to the Opening of the House of Delegates. Please notify ADEA of the name of the alternate. This notification can be done by emailing ADEA prior to the ADEA Annual Session & Exhibition or when picking up voting cards at the ADEA House of Delegates booth in the registration area of the ADEA Annual Session & Exhibition.

Admission Cards

At registration, each delegate (or alternate) will receive three cards: (1) one for admission to the Opening Session of the House, (2) one for admission to the Closing Session and (3) one for balloting for Chair-elect of the Board of Directors if an election is required. Each delegate and alternate will surrender the signed, appropriate card when entering the floor for the Opening and Closing Sessions. Any delegates or alternates who misplace their admission or voting cards should immediately report the loss to staff in the Association’s registration area.

Seating of Delegates

Delegates are seated by council affiliation, and each delegate is required to sit with his or her council. The council seating areas will be marked by signs.

Visitors

All registered ADEA Annual Session & Exhibition participants are not only invited but encouraged to attend the ADEA House of Delegates sessions, as well as meetings of the Reference Committees. There will be visitors’ seating sections at both the Opening and Closing Sessions.

Presiding Officer

The Association’s Chair of the ADEA Board of Directors—Dr. Stephen Young—is the presiding officer of the House. In the absence of the Chair of the ADEA Board of Directors, the Chair-elect of the ADEA Board of Directors is the presiding officer. The Chair may cast a vote in cases when his or her vote could alter the outcome, appoint tellers to assist in determining the result of any action taken by ballot and perform any other duties required by the rules of order.
Recording Officer

The ADEA President and CEO is the recording officer of the ADEA House of Delegates and the custodian of its records. The President and CEO may appoint a public stenographer to record the verbatim proceedings of the Opening and Closing Sessions of the House.

Rules of Order

The rules contained in the latest edition of the American Institute of Parliamentarians Standard Code of Parliamentary Procedure govern the deliberations of the House in all cases where they are applicable and not in conflict with the Association’s Bylaws.

Parliamentarian

A parliamentarian will be present during the sessions of the House of Delegates.

Explanation of Motions

To avoid confusion, each type of motion is assigned a definite rank as shown in the tables on pages 31-33.

The rank is based on the urgency of each motion. When a motion is before the House, any motion is in order if it has a higher precedence or rank than the immediately pending motion, but no motion having a lower precedence is in order. Motions are considered and decided in a reverse order to that of their proposal. For example, a motion to amend the main motion is dispensed with before the main motion, and a motion to amend an amendment is voted on before the original motion to amend.

After a motion to approve is made and seconded, the resolution is before the House for debate, amendment and final action. A motion to approve is a main motion, and a vote by the House disposes of the resolution.

A motion to postpone to a certain time may be used to defer consideration of a resolution until some definite future time during this ADEA Annual Session & Exhibition. Resolutions may be referred to the ADEA Board of Directors, councils or sections for their recommendations.

Amendments to the ADEA Bylaws

A Bylaws amendment is enacted if it receives an affirmative vote of at least two thirds of the delegates present and voting.

Voting Procedures during ADEA House of Delegates Sessions

The presiding officer usually determines the method of voting during sessions of the House. He or she may choose a voice vote, a show of hands, a standing vote or a secret ballot, depending on the closeness of the vote and the presiding officer’s sense of the House.
Principal Rules Governing Motions in the ADEA House of Delegates

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<td>Privileged Motions</td>
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<tr>
<td>Adjourn</td>
<td>No</td>
<td>Yes</td>
<td>Yes(^2)</td>
<td>Yes(^6)</td>
<td>Majority</td>
<td>None</td>
<td>Amend, limit debate, close debate</td>
<td>Yes</td>
</tr>
<tr>
<td>Recess</td>
<td>No</td>
<td>Yes</td>
<td>Yes(^2)</td>
<td>Yes(^2)</td>
<td>Majority</td>
<td>None</td>
<td>Amend, limit debate, close debate</td>
<td>Yes(^6)</td>
</tr>
<tr>
<td>Question of Privilege</td>
<td>Yes</td>
<td>No (unless presented as motion)</td>
<td>No</td>
<td>No</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>Yes</td>
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<tr>
<td>Subsidiary Motions</td>
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<td>Table</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>2/3</td>
<td>Main Motion</td>
<td>None</td>
<td>No</td>
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<tr>
<td>Close debate</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>2/3</td>
<td>Debatable motions</td>
<td>None</td>
<td>Yes(^6)</td>
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<tr>
<td>Limit or extend debate</td>
<td>No</td>
<td>Yes</td>
<td>Yes(^2)</td>
<td>Yes(^2)</td>
<td>2/3</td>
<td>Debatable motions</td>
<td>Amend, close debate</td>
<td>Yes(^6)</td>
</tr>
<tr>
<td>Postpone to a certain time</td>
<td>No</td>
<td>Yes</td>
<td>Yes(^2)</td>
<td>Yes(^2)</td>
<td>Majority</td>
<td>Main motion</td>
<td>Amend, close debate, limit debate</td>
<td>Yes(^6)</td>
</tr>
<tr>
<td>Refer to committee or board</td>
<td>No</td>
<td>Yes</td>
<td>Yes(^2)</td>
<td>Yes(^2)</td>
<td>Majority</td>
<td>Main motion</td>
<td>Amend, close debate, limit debate</td>
<td>Yes(^6)</td>
</tr>
<tr>
<td>Amend</td>
<td>No</td>
<td>Yes</td>
<td>Yes(^3)</td>
<td>Yes</td>
<td>Majority</td>
<td>Re-wordable motions</td>
<td>Close debate, limit debate, amend</td>
<td>No(^6)</td>
</tr>
</tbody>
</table>

\(^1\) Motion is made at the beginning of the business of the meeting; \(^2\) Motion is made at any time after the main motion has been made but before its consideration is completed; \(^3\) Motion is made during consideration of the matter to which the main motion relates. 

Mark: Yes, No, Majority, None
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<td><strong>Main Motions</strong></td>
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<td>a. Main Motion</td>
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<tr>
<td>The Main Motion</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Majority</td>
<td>None</td>
<td>Subsidiary</td>
<td>No</td>
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<tr>
<td>b. Specific Main Motions</td>
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<td>Amend a previous action</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Same vote</td>
<td>Adopted Main motion</td>
<td>Subsidiary</td>
<td>No</td>
</tr>
<tr>
<td>Ratify</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Same vote</td>
<td>Adopted main motion</td>
<td>Subsidiary</td>
<td>No</td>
</tr>
<tr>
<td>Adopt in-lieu-of</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Majority</td>
<td>None</td>
<td>Subsidiary</td>
<td>No</td>
</tr>
<tr>
<td>Reconsider</td>
<td>Yes(^1)</td>
<td>Yes</td>
<td>Yes(^2)</td>
<td>No</td>
<td>Majority</td>
<td>Vote on Main motion</td>
<td>Close debate, limit debate</td>
<td>No</td>
</tr>
<tr>
<td>Rescind</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Same vote</td>
<td>Adopted Main motion</td>
<td>Subsidiary except to amend</td>
<td>No</td>
</tr>
<tr>
<td>Recall from committee</td>
<td>No</td>
<td>Yes</td>
<td>Yes(^2)</td>
<td>No</td>
<td>Majority</td>
<td>Referred Main motion</td>
<td>Limit debate, close debate</td>
<td>No</td>
</tr>
<tr>
<td>------------------------</td>
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<td>Incidental Motions</td>
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<td></td>
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<td>Motions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appeal</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Majority(^7)</td>
<td>Decision of Chair</td>
<td>Close debate, limit debate</td>
<td>No</td>
</tr>
<tr>
<td>Suspend rules</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>2/3</td>
<td>Procedural rules</td>
<td>None</td>
<td>Yes</td>
</tr>
<tr>
<td>Consider informally</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>Majority</td>
<td>Main motion or subject</td>
<td>None</td>
<td>Yes</td>
</tr>
<tr>
<td>Requests</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Point of order</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Procedural error</td>
<td>None</td>
<td>No</td>
</tr>
<tr>
<td>Inquiries</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>All motions</td>
<td>None</td>
<td>No</td>
</tr>
<tr>
<td>Withdraw a motion</td>
<td>Yes</td>
<td>No (unless presented as a motion)</td>
<td>No</td>
<td>No</td>
<td>No(^8)</td>
<td>All motions</td>
<td>None</td>
<td>No</td>
</tr>
<tr>
<td>Division of question</td>
<td>No</td>
<td>No (unless presented as a motion)</td>
<td>No</td>
<td>No</td>
<td>No(^8)</td>
<td>Main motion</td>
<td>None</td>
<td>No</td>
</tr>
<tr>
<td>Division of assembly</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No(^8)</td>
<td>Indecisive vote</td>
<td>None</td>
<td>No</td>
</tr>
</tbody>
</table>


1. Motions are in order only if no motion higher on the list is pending. Thus, if a motion to close debate is pending, a motion to amend would be out of order; but a motion to recess would be in order, since it outranks the pending motion.
2. Restricted.
3. Is not debatable when applied to an undebatable motion.
4. A member may interrupt the proceedings but not a speaker.
5. Withdraw may be applied to all motions.
6. Renewable at the discretion of the presiding officer.
7. A tie or majority vote sustains the ruling of the presiding officer; a majority vote in the negative reverses the ruling.
8. If decided by the assembly, by motion, requires a majority vote to adopt.
Voting for Chair-elect of the ADEA Board of Directors

The 2014 Nomination Process for Chair-Elect of the ADEA Board of Directors

The ADEA Board of Directors placed several calls for nominations in the Bulletin of Dental Education. All members were invited to nominate as many individuals as they wished, including themselves.

The Council Administrative Boards were also invited to nominate candidates; however, the Boards were not informed of the identity of the other candidates. In order to maintain confidentiality, only the Nominating Committee and the ADEA President and CEO knew the identity of all nominees.

The deadline for submitting nominations was November 1, 2013.

The Nominating Committee Voted to Select These Candidates to Stand for Election.

Upon the recommendation of the Nominating Committee, the Board of Directors presents two candidates for 2014–15 ADEA Chair-elect of the ADEA Board of Directors. (The office leads in successive years to the offices of Chair of the ADEA Board of Directors and Immediate Past Chair of the ADEA Board of Directors.) The candidates, for whom a brief biographical sketch follows, are Dr. Michael A. Siegel, Professor and Chair, Department of Diagnostic Sciences, Nova Southeastern University College of Dental Medicine and Dr. Huw F. Thomas, Dean, Tufts University School of Dental Medicine.

The members of the ADEA House of Delegates will cast ballots for Chair-elect of the ADEA Board of Directors during the ADEA Annual Session & Exhibition. Delegates may cast their ballots for Chair-elect of the ADEA Board of Directors between the hours of 8:00 a.m. and 5:00 p.m. on Sunday, March 16 and between 8:00 a.m. and 4:30 p.m. on Monday, March 17. Voting will take place at the ADEA House of Delegates booth in the registration area in the Henry B. Gonzalez Convention Center.

These are the only times when a delegate or alternate may cast a ballot for Chair-elect. Only a delegate (or official alternate) may vote, and he or she will surrender his or her voter registration card to receive a ballot.
Nominees for ADEA Chair-elect of the ADEA Board of Directors

Michael A. Siegel, D.D.S., M.S., FDS RCSEd

Statement: Chair-elect of the Board Candidacy

It is my distinct honor to accept the nomination of the Administrative Board of the Council of Faculties to run in the 2014 election for the Chair-elect of the Board. I have been a member of ADEA since 1982 and have been extremely fortunate to have represented two institutions as a delegate to the Council of Faculties (University of Maryland School of Dentistry [1989–1995] and Nova Southeastern University College of Dental Medicine [2004–2013]). I served on the ADEA Board of Directors as the Vice President for Faculties from 2010–2013.

My career in full-time dental education began in 1982 following three years in the U.S. Army Dental Corps. From 1982–2002, I became a tenured Associate Professor in the Department of Diagnostic Sciences at the University of Maryland School of Dentistry. I also served on the Medical and Graduate School faculties during this time frame. In 2003, I was offered my current position of Professor and Chair, Department of Diagnostic Sciences, Nova Southeastern University. I hold a dual appointment in the College of Osteopathic Medicine as a Professor in the Department of Internal Medicine.

I would like to qualify my candidacy with the following parable. At the age of five years, I went with my father to work in his drugstore for the first time. Upon arriving, my father handed me a broom and told me to sweep the floor. Disappointed, I queried him because I thought this day would be one of fun and games. He told me that this was “his” drugstore, and he would never ask me to do anything he was unwilling or incapable of doing himself. I carry his words with me to this day and have patterned my entire professional education and academic career according to this tenet he taught me at such a tender age.

My approach to my career in dental education has been to work my way up the ladder, learn and assimilate information at each rung and be in a position to never have to ask a faculty member, staff member or student to perform a task that I was unwilling or incapable of myself. I have held multiple leadership positions in dentistry and have made contacts (and many friends) in dental education, organized dentistry, private practice, research and industry. Leadership is by example and this is what I hope to bring to ADEA as Chair of the Board.

Dental education faces significant challenges to include the impact of the Affordable Care Act, spear-heading the implementation of interprofessional education, utilization of the ADEA Academia-Industry guidelines, relieving student indebtedness and defining the transitioning roles of dental clinicians as primary care providers. My training and experiences in the medical and dental arenas will serve the Association well during this time of educational and healthcare reform. The membership of ADEA will shape the future of dental education. I hope to find myself in a position to facilitate the translation of our members’ visions into the reality of change and innovation for dental education. Ultimately, we are responsible to teach 21st century students to become state-of-the-art dental professionals. I want to ensure that our students are taught and assessed utilizing the most modern and effective curriculum and technologies available. I am applying for this position with a sincere desire to serve the Association and its members as we face contemporary issues affecting dental education.
Huw F. Thomas, B.D.S., M.S., Ph.D.

Statement: Chair-elect of the Board Candidacy

We have a unique opportunity to help shape the future of our profession; we should be passionate and bold and embrace that opportunity. As such, I am deeply honored and most privileged to have been nominated for the position of Chair-elect of the Board.

I have been a member of AADS/ADEA throughout my academic career, beginning as a postgraduate student with membership in the Sections of Pediatric Dentistry and Oral Biology. Most recently I have served as a member of the Administrative Board of the Council of Deans and I currently serve as Board Director for Deans. Over the past 35 years I have had the opportunity to serve in several different capacities in many professional organizations, but without doubt it is my association with ADEA that has been the most rewarding; we are truly fortunate that we belong to such an outstanding organization that is dedicated to all that dental education encompasses.

That dedication is exemplified by the many initiatives that ADEA has supported over the past decades, most recently illustrated by the ADEA Commission on Change and Innovation in Dental Education (ADEA CCI) and interprofessional education (IPE). ADEA CCI has provided us the tools and incentives to look at the way we train our future health professionals, while IPE has enabled us to imagine the environment in which we might deliver oral health care in the future. And, as oral health becomes increasingly more assimilated into general health, both from a scientific as well as a reimbursement perspective, there is no reason that we should not consider ourselves as the “gatekeepers” of total patient care. Both CCI and IPE are bold initiatives and underscore the role that ADEA can play in assisting the institutions that train our future workforce to best prepare our graduates to face the changes that inevitably will challenge us all in the years ahead.

Those challenges are many and varied. They include advances in science and technology that will undoubtedly impact the way we practice dentistry, workforce issues that will determine the composition of the dental team and how we deliver that care and, notwithstanding the many advances in oral health care that have resulted in significant improvement in oral health for the majority of Americans, we must also address the profound disparities that exist in access and affordability and dedicate more efforts in the education of professionals that can address the needs of the poor, especially of children, the elderly and those with special needs.

Despite, but perhaps because of, the many challenges that face our profession and, by extension, our educational programs, I believe that there is no better time to be engaged in academic dental education. It is with that sentiment that I ask for your support of my nomination as Chair-elect. If elected I will devote myself to these causes and work with a sincere passion for the benefit of our Association. Thank you!
Report of the ADEA Board of Directors on Resolutions for Consideration by the 2014 ADEA House of Delegates

The ADEA House of Delegates will consider the nine (9) resolutions in this report, plus any additional ones introduced at the Opening Session. The House will act on Resolutions 1H-2014 through 4H-2014 at its Opening Session on Saturday, March 15, 2014, from 4:30 to 5:30 p.m. The House will act on all others at its Closing Session on Tuesday, March 18, 2014, from 3:30 to 4:30 p.m. Both sessions will be held at the Henry B. Gonzalez Convention Center, Ballroom C1.

The resolutions from the Board of Directors in the report are sequenced as follows:

**Resolutions to be Acted on at the Opening Session:**

1H-2014  ADA Council on Dental Education and Licensure Member
2H-2014  Commission on Dental Accreditation Commissioner
3H-2014  2014 ADEAGies Foundation Appointment
4H-2014  Appreciations

**Resolutions to be Acted on at the Closing Session:**

5H-2014  ADEA Council of Deans and ADEA Council of Allied Dental Program Directors Recommendation for a Task Force and Report Toward the Elimination of the Human Subject/Patient Component of the Clinical Licensure Examination
6H-2014  ADEA Corporate Council Request to Amend its Membership Dues
7H-2014  Provisional Membership of Bluefield College School of Dental Medicine
8H-2014  Provisional Membership of Touro College of Dental Medicine and New York Medical College
9H-2014  Approval of the Fiscal Year 2015 Budget

All of the resolutions in this report that require House action are printed in boldface for delegates’ ease of identification.
Actions at the Opening Session of the ADEA House of Delegates

Resolution 1H-2014
ADA Council on Dental Education and Licensure Member

The current ADEA representatives to the ADA Council on Dental Education and Licensure and their termination dates (in the fall of the years shown) are:

• Dr. Teresa Dolan, University of Florida College of Dentistry (2014)
• Dr. Ann Boyle, Southern Illinois University School of Dental Medicine (2015)
• Dr. Cecile Feldman, Rutgers School of Dental Medicine (2016)
• Dr. David Sarrett, Virginia Commonwealth University School of Dentistry (2017)

Dr. Dolan will complete her term on the ADA Council on Dental Education and Licensure (CDEL) this fall at the 2014 ADA Annual Session. Thus, the 2014 ADEA House of Delegates will have to elect a new CDEL member. To replace Dr. Dolan on the Council, the ADEA Board of Directors is recommending that the House elect Dr. Gerald N. Glickman, Texas A&M University Baylor College of Dentistry, to a four-year term to expire 2018.

The ADEA Bylaws allow delegates to nominate additional candidates for ADA CDEL membership at the Opening Session of the House. (Please note: ADA CDEL members must be active members of the ADA.) Any delegate presenting a nominee must obtain the candidate’s consent to run and a copy of the candidate’s curriculum vitae, which will be made available for delegates’ review in the ADEA Registration Area.

The ADEA Board of Directors asks the House to approve the following resolution:

1H-2014 Resolved, that the ADEA House of Delegates elect Dr. Gerald N. Glickman to a four-year term on the ADA Council on Dental Education and Licensure with the term to begin at the conclusion of the 2014 ADA Annual Session and end at the conclusion of the 2018 ADA Annual Session.
The current ADEA representatives to the Commission and their termination dates (in the fall of the years shown) are:

- Dr. John Williams, Indiana University School of Dentistry (2014)
- Dr. William Dodge, University of Texas Health Science Center at San Antonio Dental School (2015)
- Dr. Karen West, University of Nevada, Las Vegas, School of Dental Medicine (2016)
- Dr. Denise Kassebaum, The University of Colorado School of Dental Medicine (2017)
- Dr. William Lobb, Marquette University School of Dentistry (2018)

Dr. Williams will complete his term on the Commission on Dental Accreditation (CODA) this fall at the 2014 ADA Annual Session. Thus, the 2014 ADEA House will have to elect a new Commission member beginning in 2015.

The ADEA Board of Directors is recommending that the House elect Dr. Tariq Javed, Marquette University School of Dentistry, to a four-year term to expire in 2019.

The ADEA Bylaws allow delegates to nominate additional candidates for CODA membership at the Opening Session of the House. (Please note: ADEA appointees to CODA must be active members of the ADA.) Any delegate presenting a nominee must obtain the candidate’s consent to run and a copy of the candidate’s curriculum vitae, which will be made available for delegates’ review in the ADEA registration area.

The ADEA Board of Directors asks the House to approve the following resolution:

**2H-2014** Resolved, that the ADEA House of Delegates elect Dr. Tariq Javed to a four-year term on the Commission on Dental Accreditation with the term to begin at the conclusion of the 2015 ADA Annual Session and end at the conclusion of the 2019 ADA Annual Session.
In order to enhance its ability to manage the challenges facing dental and allied dental education and research, the William J. Gies Foundation for the Advancement of Dentistry joined with ADEA in 2002 to create the William J. Gies Foundation for the Advancement of Dentistry of the American Dental Education Association (ADEAGies Foundation). The mission of the ADEAGies Foundation is to enhance the oral health of the public through programs that support dental education, research, leadership and recognition.

According to the Bylaws, the Board of Trustees of the ADEAGies Foundation consists of four or more ADEA appointed members, including a Past President (Chair of the Board), the ADEA President and CEO, one member appointed by the ADEA Board of Directors (but who cannot be a Board member) and a member appointed by the ADEA House of Delegates. The appointment by the ADEA House of Delegates is for a two-year term, beginning in July 2014 and ending in July 2016.

The ADEA Board of Directors recommends that the House elect Dr. Elise Eisenberg, New York University College of Dentistry, to a two-year term to expire in 2016.

The ADEA Board of Directors asks the House to approve the following resolution:

**Resolution 3H-2014**

2014 ADEAGies Foundation Board of Trustees Appointment

Resolved, that the ADEA House of Delegates appoint Dr. Elise Eisenberg to a two-year term beginning in July 2014 and ending in July 2016, as a member of the ADEAGies Foundation Board of Trustees.
ADEA relies significantly on outside support for a number of its activities, and numerous organizations provided much-needed assistance since last year’s ADEA Annual Session & Exhibition. The ADEA Board of Directors expresses its sincere appreciation to the following companies, organizations, institutions and individuals for their generous support. Those who have supported ADEA activities and events over the past year—from last year’s ADEA Annual Session & Exhibition until the start of this year’s Annual Session & Exhibition—are listed alphabetically. Most of the companies listed are also Corporate Members of ADEA, and we are especially grateful to them.

AAL sponsored an Exhibit Hall raffle item at the 2013 ADEA Annual Session & Exhibition.

ADEAGies Foundation funded the ADEA/William J. Gies Foundation Education Fellowship.

ADEAGies Foundation funded the ADEA/AAL Faculty of Color Tuition Scholarships.

ADEAGies Foundation funded the William J. Gies Student Research Scholarship.

A-dec sponsored an evening reception at the 46th Annual National ADEA Allied Dental Program Directors’ Conference. A-dec was a cosponsor for a networking reception at the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration. The company sponsored a luncheon at the 2013 ADEA Deans’ Conference.

AEGIS Communications was a Diamond Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. The company also sponsored the opening evening reception at the 2013 ADEA Deans’ Conference. AEGIS Communications continued its support of the ADEA Curriculum Resource Center Modules; the company provided website maintenance for the ADEA Curriculum Resource Center.

Air Techniques was a general sponsor at the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration. The company also provided a general sponsorship at the 2013 ADEA Deans’ Conference.

American Association of Community Colleges and the U.S. Department of Labor—ongoing grant from AACC for completion of AACC’s Healthcare Virtual Career Platform Federal Award.

American Association of Endodontists Foundation was a Platinum Plus Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. The association funded the ADEA/American Association of Endodontists Foundation Scholar in the 2013 ADEA Leadership Institute.

American College of Prosthodontists was a contributor to the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Aspen Dental Management, Inc. was a Gold Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. The company provided general sponsorships for both the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration and the 2013 ADEA Deans’ Conference. Aspen Dental Management, Inc. supported both the ADEA GoDental® Workshop and Recruitment Fair for Predental Students and Advisors and the ADEA Career Fair for Dental Students: Practice, Residency and More at the 2013 ADEA Annual Session & Exhibition.
axiUm Software provided inserts in attendee bags for the 2013 ADEA Annual Session & Exhibition. The company also sponsored a break at the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration.

Bien Air USA was a general sponsor for both the 2013 Mid Year Meeting for the ADEA Sections on Business and Financial Administration and Clinic Administration and the 2013 ADEA Deans’ Conference. The company also sponsored an Exhibit Hall raffle item at the 2013 ADEA Annual Session & Exhibition.

BioHorizons Implant Systems, Inc. was a general sponsor of the 2013 ADEA Deans’ Conference.

Boston University Henry M. Goldman School of Dental Medicine was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Brasseler USA provided general sponsorships for both the 2013 Mid Year Meeting for the ADEA Sections on Business and Financial Administration and Clinic Administration and the 2013 ADEA Deans’ Conference. The company also sponsored “in part” the Welcome Reception at the 46th Annual National ADEA Allied Dental Program Directors’ Conference.

Case Western Reserve University School of Dental Medicine was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation, and Achievement.

Certiphi Screening, Inc. sponsored an Exhibit Hall raffle item at the 2013 ADEA Annual Session & Exhibition.

Colgate-Palmolive Co. was a Diamond Sponsor of the 2013 William J. Gies Awards for Vision, Innovation, and Achievement. The company supported the Journal of Dental Education Online.

The company sponsored the ADEA Leadership Institute Alumni Reception welcoming the Class of 2014 at the 2013 ADEA Annual Session & Exhibition. Colgate-Palmolive Co. was a general sponsor at the 46th Annual National ADEA Allied Dental Program Directors’ Conference. The company again provided generous support for the ADEA/Colgate-Palmolive/National Dental Association Dr. Jeanne C. Sinkford Scholar in the ADEA Leadership Institute, the ADEA/Colgate-Palmolive Co./Dominick P. DePaola Scholar in the ADEA Leadership Institute, the ADEA/Colgate-Palmolive Excellence in Teaching Award, the ADEA/ADEA Council of Students/Colgate-Palmolive Junior Faculty Award, and the ADEA/Colgate-Palmolive Allied Dental Hygiene Educators Fellowship. The company was a general sponsor at the 2013 Mid Year Meeting for the ADEA Sections on Business and Financial Administration and Clinic Administration and the 2013 ADEA Deans’ Conference. Colgate-Palmolive Co. supported the Oral Care for Older Adults Module in the ADEA Curriculum Resource Center. Lastly, ADEA wishes to thank Colgate-Palmolive Co. for becoming the Exclusive Sponsor of the ADEA/Colgate-Palmolive Co. Academy for Academic Leadership/Institute for Allied Health Educators.

Columbia University College of Dental Medicine was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation, and Achievement.

Dalhousie University Faculty of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Dental Services Group was a general sponsor at the 2013 Mid Year Meeting on the ADEA Sections on Business and Financial Administration and Clinic Administration the 2013 ADEA Deans’ Conference.

DentalEZ Group was a Diamond Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. The company also was a general sponsor at the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration.
DENTSPLY International, Inc. was a Diamond Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. In addition, the company sponsored the Student Poster Awards at the 2013 ADEA Annual Session & Exhibition. DENTSPLY International, Inc. provided general sponsorships for both the 46th Annual National ADEA Allied Dental Program Directors’ Conference and the 2013 Mid Year Meeting for the ADEA Sections on Business Financial Administration and Clinic Administration. The company sponsored the Third Evening Reception at the 2013 ADEA Deans’ Conference.

Dr. Harold Katz, LLC supported the ADEA/TheraBreath Student Research Fellowships.

Eastern Dentists Insurance Company provided a sponsorship of belly bands around printed programs at the 2013 ADEA Annual Session & Exhibition. The company was a general sponsor at the 2013 ADEA Deans’ Conference. Eastern Dentists Insurance Company also provided an Exhibit Hall raffle items at the 2013 ADEA Annual Session & Exhibition.

ExamSoft Worldwide, Inc. provided a mobile app sponsorship at the 2013 ADEA Annual Session & Exhibition.

Fortress Insurance Company was a general sponsor of the 2013 ADEA Deans’ Conference.

GC America, Inc. provided an Exhibit Hall raffle item at the 2013 ADEA Annual Session & Exhibition.

G. Hartzell & Son supported an education program at the 46th Annual National ADEA Allied Dental Program Directors’ Conference.

Georgia Regents University College of Dental Medicine was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

GlaxoSmithKline was a general sponsor for at the 2013 ADEA Annual Session & Exhibition, the 46th Annual National ADEA Allied Dental Program Directors’ Conference and the 2013 ADEA Deans’ Conference.

Harvard School of Dental Medicine was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Henry Schein, Inc. was a Gold Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. The company was also a general sponsor at the 2013 Mid Year Meeting for the ADEA Sections on Business and Financial Administration and Clinic Administration and the 2013 ADEA Deans’ Conference.

Howard University College of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Hu-Friedy Manufacturing Co., LLC was a Diamond Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. The company sponsored a dinner and reception at the 46th Annual National ADEA Allied Dental Program Directors’ Conference. In addition, Hu-Friedy Manufacturing Co., LLC co-sponsored a networking reception at the 2013 Mid Year Meeting for the ADEA Sections on Business and Financial Administration and Clinic Administration. The company supported an education program at the 2013 ADEA Deans’ Conference.

Image Navigation Ltd. was a general sponsor of the 2013 Mid Year Meeting for the ADEA Sections on Business and Financial Administration and Clinic Administration and the 2013 ADEA Deans’ Conference.

Indiana University School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.
Institute for Oral Health sponsored the Allied Dental Faculty Leadership Development Program Alumni Reception at the 2013 ADEA Annual Session & Exhibition, lanyards and pens at the 2013 ADEA Annual Session & Exhibition. The company was a general sponsor at the 2013 ADEA Allied Dental Faculty Leadership Development Program, the 46th Annual National ADEA Allied Dental Program Directors’ Conference and the 2013 ADEA Deans’ Conference.

Isolite Systems was a general sponsor for the 46th Annual National ADEA Allied Dental Program Directors’ Conference, 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration and the 2013 ADEA Deans’ Conference. Isolite Systems sponsored an Exhibit Hall raffle item at the 2013 ADEA Annual Session & Exhibition.

Johnson & Johnson Consumer & Personal Products Worldwide supported the Keynote Address at the 46th Annual National ADEA Allied Dental Program Directors’ Conference.

Johnson & Johnson Healthcare Products, Division of McNEIL-PPC, Inc. was the Premier Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. The company provided the “Own the Bathroom” sponsorship during the 2013 ADEA Annual Session & Exhibition. Johnson & Johnson Healthcare Products supported the 2013 awards for both the ADEA Preventative Dentistry Scholarships and the ADEA Enid A. Neidle Scholar-in-Residence Program for Women. The company was a general sponsor of the ADEA Leadership Institute. Lastly, Johnson & Johnson Healthcare Products was a general sponsor at the 46th Annual National ADEA Allied Dental Program Directors’ Conference and the 2013 ADEA Deans’ Conference.

Kahler Slater was a general sponsor at the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration and the 2013 ADEA Deans’ Conference.

KaVo Kerr Group – Consumables supported an education program at the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration and an education program at the 2013 ADEA Deans’ Conference.

KaVo Kerr Group – Equipment supported an education program at the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration and an education program at the 2013 ADEA Deans’ Conference.

KaVo Kerr Group – Imaging supported an education program at the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration and an education program at the 2013 ADEA Deans’ Conference.

Liaison International, Inc. was a Gold Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. The company sponsored the ADEA GoDental Workshop and Recruitment Fair for Predental Students and Advisors at the 2013 ADEA Annual Session & Exhibition. Liaison International, Inc. supported both the 2013 ADEA/Liaison International GoDental Internship and ADEA/Liaison International Academic Dental Career Program Fellow.

Loma Linda University School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Marquette University School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Medical Protective Company was general sponsor of the 2013 ADEA Deans’ Conference.

Medical University of South Carolina James B. Edwards College of Dental Medicine was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Meharry Medical College School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation, and Achievement.
Midmark Corporation was a Gold Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. Midmark Corporation provided general sponsorships for both the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration and the 2013 ADEA Deans’ Conference.

Midwestern University College of Dental Medicine-Arizona was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Midwestern University College of Dental Medicine-Illinois was a Dean’s List First Time Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

National Dental Association supported the ADEA/Colgate-Palmolive/National Dental Association Dr. Jeanne C. Sinkford Scholar in the ADEA Leadership Institute.

New York University College of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Noble Biocare USA, LLC was a Gold Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. The company also provided a general sponsorship for the 2013 ADEA Deans’ Conference.

OraPharma, Inc., a subsidiary of Valeant Pharmaceuticals, was a Diamond Sponsor to the 2013 William J. Gies Awards for Vision, Innovation and Achievement. The company provided an Educational Grant for the 46th Annual National ADEA Allied Dental Program Directors’ Conference and the 2013 ADEA Deans’ Conference.

Pacific Dental Services, Inc. sponsored the posters at the 2013 ADEA Annual Session & Exhibition. The company was also a general sponsor of both the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration and the 2013 ADEA Deans’ Conference. Pacific Dental Services, Inc. supported the ADEA GoDental Workshop and Recruitment Fair for Predental Students and Advisors. The company also provided an Exhibit Hall raffle item during the 2013 ADEA Annual Session & Exhibition.

Philips Oral Healthcare, Inc. was a Diamond Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. The company was a general sponsor of both the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration and the 2013 ADEA Deans’ Conference. Philips Oral Healthcare, Inc. also provided lanyards for the 46th Annual National ADEA Allied Dental Program Directors’ Conference.

Premier Dental Products Company was a general sponsor at the 46th Annual National ADEA Allied Dental Program Directors’ Conference. The company also sponsored Exhibit Hall raffle items at the 2013 ADEA Annual Session & Exhibition.

The Procter & Gamble Company was a Diamond Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. The company sponsored the Dental Hygiene Clinic Coordinators Luncheon and the Dental Hygiene Graduate Program Directors Meeting at the 2013 ADEA Annual Session & Exhibition. The company sponsored “in part” the President’s Reception at the 2013 ADEA Annual Session & Exhibition. The Procter & Gamble Company funded both the ADEA/Crest Oral-B Scholarship for Predoctoral Dental Students Pursuing Academic Careers and the ADEA/Crest Oral-B Laboratories Scholarship for Dental Hygiene Students Pursuing Academic Careers. The company was a general sponsor at the 2013 ADEA Allied Dental Faculty Leadership Development Program and supported a breakfast for both the 46th Annual National ADEA Allied Dental Program Directors’ Conference and the 2013 ADEA Deans’ Conference. Procter & Gamble sponsored the ADEA GoDental Workshop and Recruitment Fair for Predental Students and Advisors. The company sponsored a luncheon at the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and
Clinic Administration. Last, the Procter & Gamble Company continued to sponsor both the ADEA Leadership Institute and the ADEA Deans’ Institute. The company also provided an Exhibit Hall raffle item at the 2013 ADEA Annual Session & Exhibition.

The Robert Wood Johnson Foundation was a sponsor of the need-based travel expenses for Summer Medical and Dental Education Program participants.

Roseman University of Health Sciences College of Dental Medicine – South Jordan, Utah was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. Septodont, Inc. was a Diamond Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Sigma Phi Alpha funded the ADEA/Sigma Phi Alpha Linda DeVore Scholarship. Sirona Dental, Inc. sponsored branded travel coffee mugs, logo footprints in the Exhibit Hall, flyer inserts in attendee bags, and the White Coat Ceremony at the 2013 ADEA Annual Session & Exhibition. The company was a general sponsor for the 46th Annual National ADEA Allied Dental Program Directors’ Conference, the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration and the 2013 ADEA Deans’ Conference. Sirona Dental, Inc. sponsored Exhibit Hall raffle items at the 2013 ADEA Annual Session & Exhibition.

Stage Front Presentation Systems was a general sponsor for the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration and the 2013 ADEA Deans’ Conference.

Stony Brook University School of Dental Medicine was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Sunstar Americas, Inc. was a Diamond Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement. The company supported the 2013 ADEA Leadership Institute. Sunstar Americas, Inc. was a general sponsor for both the 46th Annual National ADEA Allied Dental Program Directors’ Conference and the 2013 ADEA Deans’ Conference. Sunstar also sponsored the ADEA/Sunstar Americas, Inc./Harry W. Bruce, Jr. Legislative Dinner at the 2013 ADEA Annual Session & Exhibition. The company also supported the ADEA/Sunstar Americas, Inc./Harry W. Bruce, Jr. Legislative Fellowship and the ADEA/Sunstar Americas, Inc./Jack Bresch Student Internship Award Program. The company also provided an Exhibit Hall raffle item at the 2013 ADEA Annual Session & Exhibition.

Texas A&M University Baylor College of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Tufts University School of Dental Medicine was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Ultradent Products, Inc. was a general sponsor at the 2013 Mid Year Meeting of the ADEA Sections on Business and Financial Administration and Clinic Administration. The company also provided an Exhibit Hall raffle item at the 2013 ADEA Annual Session & Exhibition.

University of Alabama at Birmingham School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of California, Los Angeles, School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

The University of Colorado School of Dental Medicine was a Dean’s List First Time Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.
University of Connecticut School of Dental Medicine was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of Detroit Mercy School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of Illinois at Chicago College of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of Maryland School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of Michigan School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of Minnesota School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of Missouri-Kansas City School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of Nebraska Medical Center College of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of North Carolina at Chapel Hill School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of Oklahoma College of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of Pennsylvania School of Dental Medicine was a Dean’s List First Time Sponsor of the 2013 William J. Gies Awards for Vision, Innovation, and Achievement.

University of Tennessee Health Science Center College of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of Texas Health Science Center at San Antonio Dental School was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

The University of Texas School of Dentistry at Houston was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of Utah School of Dentistry was a Dean’s List First Time Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of Washington School of Dentistry was a Dean’s List First Time Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

University of the Pacific Arthur A. Dugoni School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Virginia Commonwealth University School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

VitalSource Technologies, Inc. provided a general sponsorship for the 2013 ADEA Deans’ Conference.

W.K. Kellogg Foundation funded a grant to support partnership with dental schools that have minority dental faculty development and dental allied health programs to enhance community partnership.

West Virginia University School of Dentistry was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.
Western University of Health Sciences College of Dental Medicine was a Deans’ List Sponsor of the 2013 William J. Gies Awards for Vision, Innovation and Achievement.

Whip Mix Corporation sponsored the Section on Prosthodontics Meeting & Luncheon and an Exhibit Hall raffle item at the 2013 ADEA Annual Session & Exhibition.

Young Dental Manufacturing was a general sponsor at the 46th Annual National ADEA Allied Dental Program Directors’ Conference.

Zimmer Dental, Inc. provided an educational grant for the 2013 ADEA Annual Session & Exhibition. The company also supported the ADEA/Zimmer Dental Implant Education Teaching Award at the 2013 ADEA Annual Session & Exhibition.

The ADEA Board of Directors asks the House to approve the following resolution:

**4H-2014**

Resolved, that the American Dental Education Association expresses its sincere appreciation to the following organizations and individuals for their generous support of the Association’s activities and programs between the start of the 2013 ADEA Annual Session & Exhibition and the start of the 2014 ADEA Annual Session & Exhibition:

- AAL
- ADEAGies Foundation
- A-dec
- AEGIS Communications
- Air Techniques
- American Association of Community Colleges and the U.S. Department of Labor
- American Association of Endodontists Foundation
- American College of Prosthodontists
- Aspen Dental Management, Inc.
- axiUM Software
- Bien Air USA
- BioHorizons Implant Systems, Inc.
- Boston University Henry M. Goldman School of Dental Medicine
- Brasseler USA
- Case Western Reserve University School of Dental Medicine
- Certiphi Screening, Inc.
- Colgate-Palmolive Co.
- Columbia University College of Dental Medicine
- Dalhousie University Faculty of Dentistry
- Dental Services Group
- DentalEZ Group
- DENTSPLY International, Inc.
- Dr. Harold Katz, LLC
- Eastern Dentists Insurance Company
- ExamSoft Worldwide, Inc.
- Fortress Insurance Company
- GC America, Inc.
- G. Hartzell & Son.
- Georgia Regents University College of Dental Medicine
- GlaxoSmithKline
- Harvard School of Dental Medicine
Henry Schein, Inc.
Howard University College of Dentistry
Hu-Friedy Manufacturing Co., LLC
Image Navigation Ltd.
Indiana University School of Dentistry
Institute for Oral Health
Isolite Systems
Johnson & Johnson Consumer & Personal Products Worldwide
Johnson & Johnson Healthcare Products, Division of McNEIL-PPC, Inc.
Kahler Slater
KaVo Kerr Group – Consumables
KaVo Kerr Group – Equipment
KaVo Kerr Group – Imaging
Liaison International, Inc.
Loma Linda University School of Dentistry
Marquette University School of Dentistry
Medical Protective Company
Medical University of South Carolina James B. Edwards College of Dental Medicine
Meharry Medical College School of Dentistry
Midmark Corporation
Midwestern University of College of Dental Medicine-Arizona
Midwestern University of College of Dental Medicine-Illinois
National Dental Association
New York University College of Dentistry
Noble Biocare USA, LLC
OraPharma, Inc., a subsidiary of Valeant Pharmaceuticals
Pacific Dental Services, Inc.
Philips Oral Healthcare, Inc.
Premier Dental Products Company
The Procter & Gamble Company
The Robert Wood Johnson Foundation
Roseman University of Health Sciences College of Dental Medicine – South Jordan, Utah
Septodont, Inc.
Sigma Phi Alpha
Sirona Dental, Inc.
Stage Front Presentation Systems
Stony Brook University School of Dental Medicine
Sunstar Americas, Inc.
Texas A&M University Baylor College of Dentistry
Tufts University School of Dental Medicine
Ultradent Products, Inc.
University of Alabama at Birmingham School of Dentistry
University of California, Los Angeles, School of Dentistry
The University of Colorado School of Dental Medicine
University of Connecticut School of Dental Medicine
University of Detroit Mercy School of Dentistry
University of Illinois at Chicago College of Dentistry
University of Maryland School of Dentistry
University of Michigan School of Dentistry
• University of Minnesota School of Dentistry
• University of Missouri - Kansas City School of Dentistry
• University of Nebraska Medical Center College of Dentistry
• University of North Carolina at Chapel Hill School of Dentistry
• University of Oklahoma College of Dentistry
• University of Pennsylvania School of Dental Medicine
• University of Tennessee Health Science Center College of Dentistry
• University of Texas Health Science Center at San Antonio Dental School
• The University of Texas School of Dentistry at Houston
• University of Utah School of Dentistry
• University of Washington School of Dentistry
• University of the Pacific Arthur A. Dugoni School of Dentistry
• Virginia Commonwealth University School of Dentistry
• VitalSource Technologies, Inc.
• W.K. Kellogg Foundation.
• West Virginia University School of Dentistry
• Western University of Health Sciences College of Dental Medicine
• Whip Mix Corporation
• Young Dental Manufacturing
• Zimmer Dental, Inc.
RESOLUTION 5H-2014
ADEA Council of Deans and ADEA Council of Allied Dental Program Directors
Recommendation for a Task Force and Report Toward the Elimination of the Human Subject/Patient Component of the Clinical Licensure Examination

Background:
This resolution is submitted by the Administrative Boards of the ADEA Council of Deans and the ADEA Council of Allied Dental Program Directors to the ADEA Board of Directors for approval and transmittal to the ADEA House of Delegates following a unanimous vote for its approval at the ADEA Council of Deans at their business meeting on Monday, November 18, 2013 in Savannah GA, at which approximately 42 dental deans were in attendance. This action is the end point of a multi-year discussion by U.S. dental school deans around matters of concern related to the clinical examination of candidates for licensure in the United States. The entire program of the 2013 Deans Summer Institute was devoted to this topic, prompting further discussion in Savannah and this proposed resolution for consideration by the ADEA House of Delegates. The Administrative Board of the ADEA CADPD strongly supports this resolution.

It is the recommendation of the ADEA Council of Deans and the ADEA Council of Allied Dental Program Directors Administrative Board that the human subject/patient-based component of clinical licensure examinations be eliminated for the following primary reasons:

• The current clinical examination protocol lacks the psychometric strength expected of an assessment of such importance and consequence. Specifically, the clinical examination component lacks sufficient validity and reliability while alternative methods exist with such characteristics.

• A myriad of ethical concerns exists about the primary construct and secondary effects of this examination component. The foremost concern is that individuals receiving treatment within the examination are, by definition, human subjects in a formal protocol and are not patients since essential elements of the doctor-patient relationship are absent. This primary concern seeds several secondary concerns including:
  o Institutional Review Board (IRB) approval should be required for human subject participation.
  o Proper informed consent is lacking.
  o Methods to recruit individuals as subjects are, in some cases, inappropriate and unethical.

• Educational institutions that provide the facilities for the clinical examination are most probably, in certain cases, permitting or acknowledging care that would not comply with those institutions’ own standards of care. Such violations may include the planning of treatment that would normally be considered not advisable, the provision of unnecessary treatment (i.e. provision of an irreversible operative procedure rather than observation and non-surgical care), an inappropriate delay in the provision of needed, timely care to match the scheduling of the clinical examination, and an absence of a defined protocol to assess patient response to and clinical outcomes of the therapy provided.

• The safety and well-being of patients are at risk by receiving care within an examination protocol that, by design, requires that an unlicensed, novice provider deliver care independently and under very limited supervision.
• Excessive liability is assumed by the educational institutions providing the clinical site for the delivery of the examination. There is significant concern that educational institutions are being placed at significant liability risk due to a) lack of Institutional Review Board approval for the protocol, b) lack of proper informed consent, and c) the consequences of treatment provided by unlicensed providers under the limited supervision of an external party not affiliated with the educational institutions.

The ADEA Council of Deans and the Administrative Board of the ADEA Council of Allied Dental Program Directors strongly believe that better alternatives exist for the clinical portions of licensure examinations and proposes that the OSCE (Objective Structured Clinical Exam) is the most appropriate alternative at this time because the **Objective Structured Clinical Exam (OSCE):**

• Does not require the participation of human subjects or patients, thereby eliminating the ethical concerns described herein.
• Has been evaluated psychometrically and shown to have excellent validity and reliability.
• Has a strong track record as a trusted, reliable approach for clinical assessment of candidates for licensure in Canada since 1995 and was recently adopted as an alternative assessment pathway for dental licensure in the state of Minnesota. In addition, several U.S. schools currently host the National Dental Examining Board of Canada/Minnesota OSCE examination for student candidates, illustrating that the examination can be easily facilitated.
• Could be rather rapidly adopted by a state or regional testing agency or agencies. Significant expertise is available to assist such agencies in OSCE design and delivery.
• Has potential to be formatted as a national examination delivered by a third party testing agency.

As other alternatives for the clinical portion of licensure examinations are developed and validated, they should also be considered.

To foster the transition away from live patients and toward OSCEs as the new exam, the ADEA Council of Deans and Administrative Board of the ADEA Council of Allied Dental Program Directors recommends the creation of a Task Force. The Task Force, comprised of representatives of ADEA, assessment experts, the licensing examination community and other communities of interest would develop an action plan to transition to this new exam. A report of the Task Force to the ADEA Board of Directors will be made in January 2015, and subsequently to the ADEA House of Delegates at the March 2015 ADEA Annual Session & Exhibition.

**The Task force would be charged with:**
The Task Force is charged with preparing a report to the ADEA House of Delegates 2015 meeting with recommendations for assisting educational institutions in advocating for the transition to a validated OSCE for the clinical assessment of candidates for licensure, as allowable by state licensing regulations.

**Financial Impact Statement for the Task Force:**
• Travel for 10 individuals (six to seven task force members and three staff) who would attend one task force meeting ($14,000)
• Three conference calls ($375)

The ADEA Board of Directors asks the House to approve the following resolution:
5H-2014. Resolved, that the American Dental Education Association recommends the elimination of the human subject/patient-based components of clinical licensure examinations and the adoption of an alternative and validated process for the clinical assessment of candidates for licensure, such as the Objective Structured Clinical Examination (OSCE), and to that end we recommend creation of a task force comprised of representatives of ADEA, assessment experts, the licensing examination community and other communities of interest which would develop an action plan to transition to this new exam. A report of the Task Force to the ADEA Board of Directors should be made in January 2015, and subsequently to the ADEA House of Delegates at the March 2015 ADEA Annual Session & Exhibition.

And be it further resolved that a sum not to exceed $20,000 be allocated for the work of the Task Force.
Following the ADEA Corporate Council October 2013 meeting, the Council voted and overwhelmingly approved an increase in the ADEA Corporate Member annual dues by $350, raising the dues from $3,400 to $3,750.

The recommended $350 increase is intended to fund the collective ADEA Corporate Council sponsorship of the annual ADEA Dental Student Virtual Fair.

This increase would amend the current membership dues structure as stated in the ADEA Governance Policy and Procedures Manual, “Membership Dues.”

The ADEA Board of Directors asks the House to approve the following resolution:

6H-2014 Resolved, that the ADEA Corporate Member dues be increased by $350, from $3,400 to $3,750, effective July 1, 2014 and the $350 increase is allocated to sponsor the ADEA Dental Student Virtual Fair.
Resolution 7H-2014

Provisional Membership of Bluefield College School of Dental Medicine

The ADEA Bylaws provide that a developing dental school planning to grant a D.D.S. or D.M.D. degree as part of an accredited college or university in the United States, Puerto Rico or Canada is eligible to apply for Provisional Membership. Applications for Provisional Membership are to be presented in writing at least 60 days before an ADEA Annual Session & Exhibition. An institution is elected to membership by a majority affirmative vote of the House of Delegates. Membership becomes effective on July 1 following House approval.

The Bluefield College School of Dental Medicine has made a timely application for ADEA Provisional Membership in writing and does meet the criteria for Provisional Membership.

The Board of Directors asks the House to approve the following resolution:

7H-2014 Resolved, that the ADEA House of Delegates accepts the Bluefield College School of Dental Medicine’s application for Provisional Membership in ADEA.
8H-2014

Provisional Membership of Touro College of Dental Medicine and New York Medical College

The ADEA Bylaws provide that a developing dental school planning to grant a D.D.S. or D.M.D. degree as part of an accredited college or university in the United States, Puerto Rico or Canada is eligible to apply for Provisional Membership. Applications for Provisional Membership are to be presented in writing at least 60 days before an ADEA Annual Session & Exhibition. An institution is elected to membership by a majority affirmative vote of the House of Delegates. Membership becomes effective on July 1 following House approval.

The Touro College of Dental Medicine and New York Medical College has made a timely application for ADEA Provisional Membership in writing and does meet the criteria for Provisional Membership.

The Board of Directors asks the House to approve the following resolution:

8H-2014 Resolved, that the ADEA House of Delegates accepts the Touro College of Dental Medicine and New York Medical College’s application for Provisional Membership in ADEA.
Resolution 9H-2014

Approval of the Fiscal Year 2015 Budget

In addition to the following overview, delegates should refer to Exhibits 1-2015 and 2-2015 below. Exhibit 1-2015 shows revenue for fiscal years 2011 through 2015 and Exhibit 2-2015 shows expenses for the same years. The ADEA fiscal year runs from July 1 through June 30.

The ADEA Board of Directors asks the House to approve the following resolution:

9H-2014 Resolved, that the ADEA House of Delegates approves the ADEA Fiscal Year 2015 (July 1, 2014 through June 30, 2015) operating budget.
## Fiscal Year 2015 Proposed Budget

### Revenue

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<td>Official Guide to Dental Schools</td>
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<td>271,000</td>
<td>145,250</td>
<td>176,500</td>
</tr>
<tr>
<td><strong>TOTAL CONTRIBUTIONS/GRANTS</strong></td>
<td>531,119</td>
<td>952,086</td>
<td>997,119</td>
<td>580,813</td>
<td>728,873</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Meetings Registration and Sponsorships</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Session/Exhibits Fees</td>
<td>951,245</td>
<td>881,025</td>
<td>1,057,748</td>
<td>992,835</td>
<td>1,225,030</td>
</tr>
<tr>
<td>Deans' Conference Fees</td>
<td>60,185</td>
<td>57,033</td>
<td>56,250</td>
<td>56,250</td>
<td>51,000</td>
</tr>
<tr>
<td>Sponsor Fees</td>
<td>719,758</td>
<td>1,109,870</td>
<td>703,410</td>
<td>727,550</td>
<td>647,000</td>
</tr>
<tr>
<td>Other Meetings</td>
<td>184,346</td>
<td>284,777</td>
<td>332,736</td>
<td>378,963</td>
<td>528,645</td>
</tr>
<tr>
<td><strong>TOTAL MEETINGS REGISTRATION AND SPONSORS</strong></td>
<td>1,915,534</td>
<td>2,332,705</td>
<td>2,160,144</td>
<td>2,155,598</td>
<td>2,451,675</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Income</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Investment &amp; Other Income</td>
<td>1,227,416</td>
<td>40,898</td>
<td>881,840</td>
<td>188,492</td>
<td>378,568</td>
</tr>
<tr>
<td>Donated Services</td>
<td>143,375</td>
<td>78,365</td>
<td>83,583</td>
<td>75,000</td>
<td>-</td>
</tr>
<tr>
<td><strong>TOTAL OTHER</strong></td>
<td>1,370,791</td>
<td>117,263</td>
<td>965,423</td>
<td>263,492</td>
<td>378,568</td>
</tr>
</tbody>
</table>

**Total Revenues**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOTAL REVENUES</strong></td>
<td><strong>$20,229,417</strong></td>
<td><strong>$21,313,377</strong></td>
<td><strong>$23,190,510</strong></td>
<td><strong>$21,395,884</strong></td>
<td><strong>$22,799,486</strong></td>
</tr>
</tbody>
</table>
### Fiscal Year 2015 Proposed Budget

**Expense**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time salaries</td>
<td>5,313,275</td>
<td>5,727,332</td>
<td>6,444,664</td>
<td>6,495,355</td>
<td>6,953,152</td>
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<tr>
<td>Temporary salaries</td>
<td>256,474</td>
<td>254,087</td>
<td>351,368</td>
<td>122,345</td>
<td>178,421</td>
</tr>
<tr>
<td>Payroll Taxes</td>
<td>350,593</td>
<td>391,882</td>
<td>430,213</td>
<td>429,571</td>
<td>452,340</td>
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<tr>
<td>Benefits</td>
<td>749,395</td>
<td>769,176</td>
<td>860,849</td>
<td>1,127,704</td>
<td>1,251,554</td>
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<tr>
<td>Legal Fees</td>
<td>283,144</td>
<td>277,644</td>
<td>221,928</td>
<td>187,325</td>
<td>159,000</td>
</tr>
<tr>
<td>Auditing Fees</td>
<td>30,985</td>
<td>32,095</td>
<td>29,800</td>
<td>42,000</td>
<td>32,000</td>
</tr>
<tr>
<td>Consultants, Honoraria and Stipends</td>
<td>1,845,686</td>
<td>1,908,049</td>
<td>2,579,712</td>
<td>1,648,150</td>
<td>1,931,510</td>
</tr>
<tr>
<td>Investment Fees</td>
<td>39,725</td>
<td>45,780</td>
<td>53,607</td>
<td>50,500</td>
<td>56,287</td>
</tr>
<tr>
<td><strong>PERSONNEL COSTS AND FEES, TOTAL</strong></td>
<td>8,869,277</td>
<td>9,406,045</td>
<td>10,972,141</td>
<td>10,102,950</td>
<td>11,014,264</td>
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<tr>
<td>Staff</td>
<td>480,414</td>
<td>533,764</td>
<td>804,815</td>
<td>762,839</td>
<td>949,421</td>
</tr>
<tr>
<td>Nonstaff</td>
<td>276,752</td>
<td>285,877</td>
<td>440,861</td>
<td>230,971</td>
<td>504,189</td>
</tr>
<tr>
<td><strong>TRAVEL, TOTAL</strong></td>
<td>757,166</td>
<td>819,641</td>
<td>1,245,676</td>
<td>993,810</td>
<td>1,453,610</td>
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<tr>
<td>Bank &amp; Credit Card Charges</td>
<td>335,558</td>
<td>308,716</td>
<td>314,041</td>
<td>361,449</td>
<td>247,430</td>
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<td>Developmental Programming</td>
<td>285,313</td>
<td>415,414</td>
<td>330,383</td>
<td>294,368</td>
<td>308,300</td>
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<td>Data Processing</td>
<td>3,154,875</td>
<td>3,473,330</td>
<td>3,687,678</td>
<td>3,993,345</td>
<td>4,144,144</td>
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<td>Computer Operations</td>
<td>285,623</td>
<td>389,993</td>
<td>439,556</td>
<td>308,605</td>
<td>427,567</td>
</tr>
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<td>Telephone/Fax</td>
<td>97,179</td>
<td>112,653</td>
<td>136,338</td>
<td>83,486</td>
<td>88,760</td>
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<td>Postage/Freight</td>
<td>154,944</td>
<td>113,156</td>
<td>123,985</td>
<td>178,487</td>
<td>159,704</td>
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<td>Office Supplies</td>
<td>80,902</td>
<td>93,546</td>
<td>63,643</td>
<td>66,314</td>
<td>63,099</td>
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<tr>
<td>Printing/Reproduction</td>
<td>229,961</td>
<td>250,064</td>
<td>282,877</td>
<td>359,128</td>
<td>338,527</td>
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<tr>
<td>Rent &amp; Refurbishing expense</td>
<td>695,573</td>
<td>692,358</td>
<td>673,357</td>
<td>752,916</td>
<td>786,761</td>
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<tr>
<td>Capital Expenditures</td>
<td>4,326</td>
<td>5,401</td>
<td>-</td>
<td>11,289</td>
<td>5,289</td>
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<tr>
<td>Depreciation/Amortization</td>
<td>306,359</td>
<td>301,321</td>
<td>296,456</td>
<td>319,500</td>
<td>272,100</td>
</tr>
<tr>
<td>Equipment Rental</td>
<td>40,884</td>
<td>47,694</td>
<td>52,173</td>
<td>62,340</td>
<td>62,340</td>
</tr>
<tr>
<td>Repairs &amp; Maintenance</td>
<td>27,121</td>
<td>39,416</td>
<td>27,278</td>
<td>67,836</td>
<td>33,627</td>
</tr>
<tr>
<td>Insurance</td>
<td>78,227</td>
<td>75,937</td>
<td>65,078</td>
<td>70,000</td>
<td>80,000</td>
</tr>
<tr>
<td>Memorial/Contributions</td>
<td>96,154</td>
<td>167,517</td>
<td>349,057</td>
<td>176,500</td>
<td>77,000</td>
</tr>
<tr>
<td>Dues/Subscriptions/Membership Fees</td>
<td>105,400</td>
<td>137,908</td>
<td>157,597</td>
<td>130,774</td>
<td>141,926</td>
</tr>
<tr>
<td>Employee Prof. Development</td>
<td>97,324</td>
<td>132,051</td>
<td>126,979</td>
<td>184,200</td>
<td>149,000</td>
</tr>
<tr>
<td>Miscellaneous Expense</td>
<td>8,001</td>
<td>4,404</td>
<td>32,053</td>
<td>69,503</td>
<td>35,567</td>
</tr>
<tr>
<td>Meeting Expense</td>
<td>2,253,684</td>
<td>2,456,742</td>
<td>2,192,730</td>
<td>2,236,064</td>
<td>2,373,784</td>
</tr>
<tr>
<td>Donated Services</td>
<td>143,375</td>
<td>76,365</td>
<td>83,583</td>
<td>75,000</td>
<td>-</td>
</tr>
<tr>
<td>Recruitment &amp; Retention</td>
<td>57,703</td>
<td>145,774</td>
<td>67,774</td>
<td>35,300</td>
<td>14,681</td>
</tr>
<tr>
<td>Awards &amp; Fellowships</td>
<td>188,211</td>
<td>221,248</td>
<td>253,973</td>
<td>143,500</td>
<td>174,525</td>
</tr>
<tr>
<td>Marketing</td>
<td>140,993</td>
<td>72,632</td>
<td>143,777</td>
<td>119,200</td>
<td>147,481</td>
</tr>
<tr>
<td>Bad Debt Expense</td>
<td>15,922</td>
<td>13,462</td>
<td>25,640</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Contribution to Reserves</td>
<td>-</td>
<td>-</td>
<td>200,000</td>
<td>-</td>
<td>200,000</td>
</tr>
<tr>
<td><strong>OTHER COSTS, TOTAL</strong></td>
<td>8,883,582</td>
<td>9,727,102</td>
<td>9,928,206</td>
<td>10,299,124</td>
<td>10,331,612</td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td>$ 18,610,025</td>
<td>$ 19,952,788</td>
<td>$ 22,146,023</td>
<td>$ 21,395,884</td>
<td>$ 22,799,486</td>
</tr>
<tr>
<td><strong>NET SURPLUS (DEFICIT)</strong></td>
<td>$ 1,719,392</td>
<td>$ 1,360,589</td>
<td>$ 1,044,487</td>
<td>$ -</td>
<td>$ -</td>
</tr>
</tbody>
</table>
The proposed FY 2015 (July 1, 2014 - June 30, 2015) Association budget was developed over the last four months through a collaborative process involving staff, the Association’s outside accountants, the ADEA Finance Committee, and the ADEA Board of Directors. Based on these discussions among staff, accountants, and leadership, the proposed FY 2015 budget reflects the current level of programming and services with a focus on ADEA’s 2011-2014 Strategic Directions as well as overall cost efficiencies. The contribution to reserves is estimated at $200,000. As much as possible, the budget projections are based on historical information from FY 2013 and FY 2014 (note that less than half of FY 2014 was complete when the proposed FY 2015 budget was prepared).

**REVENUE**

The proposed total budgeted revenue for the Association in FY 2015 is $22,799,486. The proposed budget is balanced with total revenues equaling total expenses. This figure represents a 6% increase from the FY 2014 budget and a 2% decrease from actual FY 2013 revenue. The growth versus the prior year budget is primarily driven by an increase in projected application service and meetings registration revenues. The nearly 2% variance under FY13 actual results represents a conservative budgeting approach.

**Membership Dues**

Modest changes in total dollars by category are driven by changes in number of members based on staff estimates. There are no proposed changes to the Association’s dues in any membership category.

**Active**

Based on 65 U.S. dental schools and 1 ADEA House of Delegates approved provisional dental school at $25,522 each. The provisional dental schools included in this proposed budget is the Bluefield College School of Dental Medicine.

**Affiliate**

Budgeted affiliate dues are based on the current affiliate institutional membership and the continuing recruitment campaign. The proposed budget is based on 10 Canadian Schools at $1,815 each, 165 allied members at $945, 35 hospital-based members at $984, 4 advanced non-hospital members at $3,998, and 6 federal members at $3,922.

**Corporate**

The proposed total budgeted dues revenue in this category is based on 60 corporate members at $3,400.

**Individual**

Proposed total budgeted dues revenue in this category is based on the current individual member count of 338 individual members at $125, as well as retiree dues of $62.50.

**Student**

A modest amount of student dues is budgeted for members not affiliated with an ADEA member institution who therefore pay for their memberships. Proposed total budgeted dues revenue in this category is based on 109 student members at $40.
Publications Revenue

The proposed total budget for publications revenue for FY 2015 is lower than the FY 2014 budgeted revenue by 10% or $59,300. The change is based on FY 2013 actual figures and advertising revenue trends in all media. This is a conservative budget, given the current volatility in advertising.

Journal of Dental Education and ADEA’s Bulletin of Dental Education Subscriptions Sales

The proposed JDE/BDE subscription sales budget of $212,100 is based on maintaining revenue consistent with FY 2013 actual revenue.

ADEA Official Guide to Dental Schools

Publication sales of $83,423 are based on actual FY 2013 revenue.

ADEA Directory of Institutional Members

Advertising sales of $25,000 are based on estimated projections.

Journal of Dental Education Advertising

The proposed budget of $110,000 for FY 2015 is lower than the FY 2013 actual figures by 22% or $31,746 based on estimated projections.

Bulletin of Dental Education Advertising

The proposed FY 2015 budget is $16,500, based on estimated projections.

Other Publications/Advertising

This includes ADEA’s ExploreHealthCareers website, pay per view articles, reprints, and Website advertising revenue, is budgeted at $102,176 for FY 2015. This is lower than actual FY 2013 due to a projected decrease in print advertising, and market volatility.

Application Fees

ADEA AADSAS and ADEA CAAPID

Projected revenue for ADEA AADSAS and ADEA CAAPID is $12,952,170.

Revenue for ADEA AADSAS projected at $11,745,170 is based on 10,900 applicants, down from 11,200 applicants from FY 2014 budget and is based on application figures for the current cycle. Revenue increased by 3% from the FY 2014 budget. The budget includes a slight increase in the initial designation fee from $244 to $245 and an increase in the additional designation fee from $90 to $93.

These increases support a web-based multidirectional portal that is comprehensive, user-friendly and provides the efficient delivery of applicant data to ADEA’s end users (applicants, admissions officers, and health professions advisors). The Fee Reduction Program budget of $150,000 for FY2015 considers the needs of applicants with extreme financial constraints. It is ADEA’s custom to budget relatively conservatively on both applicants and designations.

Projected revenue for ADEA CAAPID is $1,207,000. This figure is based on a projected 1,700 applicants selecting an average of 6 designations.
ADEA PASS
Projected revenue for ADEA PASS is $3,496,000 based on 4,000 applicants. The initial designation fee remained the same from FY 2014 budget at $190 and an increase of $1 for each additional designation, from $71 to $72 is proposed.

ADEA PASS also serves as the registration site for the Dental Match. ADEA PASS collects Dental Match fees, reserves $7 per registration to cover credit card and operational costs, and passes the remaining $83 per registrant to the National Matching Service. ADEA’s net PASS-Match revenue is projected to be $21,000 based on an estimated 3,000 Match registrants at $7 per registrant.

ADEA DHCAS (Dental Hygiene Centralized Application Service)
This is a centralized application service for dental hygiene programs launched in August 2013. The projected revenue for ADEA DHCAS is $36,370 based on 2,400 applicants. The initial designation fee is $95 and $45 for each additional designation.

Grants & Contributions
Foundation Support
Budgeted support of $552,373 is based on anticipated continued support from the Robert Wood Johnson Foundation (RWJF) for the American Association of Medical Colleges/ADEA Summer Medical and Dental Education Program. In addition, ADEA receives support for the ADEAGies Foundation/AADR Academic Dental Careers Fellowship Program (ADCFP) and anticipates funding for the Dental Pipeline Connections.

Fellowships and Scholarships
This category is budgeted at $176,500 based on ADEA’s portfolio of annual fellowships and scholarships.

Meetings Registration Income
Association meetings overall have been budgeted for FY 2015 based on the ADEA Board of Directors’ goal of financial neutrality while taking into account specific subsidies as approved by the Board of Directors.

ADEA Annual Session & Exhibition Fees
Registration and exhibitor fees for the 2015 ADEA Annual Session & Exhibition in Boston, Massachusetts are budgeted at $1,225,030.

ADEA Deans’ Conference Fees
Proposed budgeted revenues include a Deans’ Conference Assessment of $750 that is paid by all U.S. and Canadian dental schools.

Sponsor Fees
Budgeted at $647,000, this figure includes sponsorship of the 2015 ADEA Annual Session & Exhibition in the amount of $27,500 and other conferences and programs in the amount of $619,500. These figures are based on prior year actual figures, commitments already made for FY 2014 and the current economic climate. ADEA will continue to seek additional sponsorships for FY 2015 meetings.

Other Conferences
Registration revenue increases 59% over FY13 actuals. This is because in addition to our other annual meetings (such as the ADEA Fall Meetings, Allied Program Director’s Conference,
Emerging Leaders, and Leadership Institute), we will also host the ADEA International Women’s Leadership Conference, several Regional Faculty Development Workshops, and the Allied Dental Leadership Faculty Development Program.

**Investment and Other Income**

Investment Income has been conservatively projected at $378,568 in FY 2015 based on the 12 month trailing and long term (since 1926) annualized return of an asset allocation portfolio such as ours as approved by the ADEA Board of Directors.

**EXPENSES**

Total expenses recommended in the proposed FY 2015 budget are $22,799,486. This figure represents a 6% increase from the FY 2014 expense budget and a 3% increase from actual expenses for FY 2013.

**Personnel Costs and Fees**

Total Personnel Costs and Fees are projected at $11,014,264 in the proposed FY 2015 budget. This figure is a 9% increase from the FY 2014 budget and a 0.4% increase from FY 2013 actual personnel costs.

A 4% pool is budgeted for salary adjustments in FY 2015. The salary adjustment pool is projected based on potential base salary increases and promotions. The ADEA Board of Directors reviews and approves any proposed base salary increase at the June board meeting immediately preceding the fiscal year. There are three new positions proposed in the budget, for administrative support, governance, and marketing.

**Temporary Salaries**

Expenses for temporary staff are budgeted at $178,421 based on projections for FY 2015.

**Payroll Taxes and Other Benefits**

Employee benefits are conservatively budgeted at 25% of salaries, assuming that all vacant positions will be filled and that employees filling these positions will be eligible for all benefits during FY 2015.

**Legal Fees**

Legal fees are based on historical experience and projections of required services in FY 2015 and recent actual expenses.

**Consultants**

Consultant expense is budgeted at $1,931,510 and includes expenses for consulting services, honoraria and stipends. The proposed consultant budget includes services for outsourced accounting, human resources, and editorial and production services, as well as consultants for ADEA’s website initiatives.

**Travel**

Travel costs by most carriers are increasing. Total travel expenses have increased by 18% from the FY 2013 actual expenses and are based on the estimated number of people traveling and the number of ADEA meetings in FY 2015. The proposed budget for Staff Travel is an increase of $153K for FY2015 compared to FY2013 actual. The increase is driven by the growth and influence of ADEA. As a part of the fulfillment of the 2011-2014 ADEA Strategic Directions, ADEA created the ADEA Policy Center to bring together and better integrate the Association’s policy initiatives. A critical focus of the ADEA Policy Center is building recognition for the
important role ADEA’s member institutions and the entire dental education community play in the larger university context. Beyond the critical advocacy role ADEA plays in the halls of Congress, the ADEA Policy Center advocates for the entire dental education community on issues that include higher education, health professions and oral health. ADEA Staff are currently working with travel vendors to find cost savings opportunities going forward.

Other Costs

Bank and Credit Card Charges
The budget is $247,430 for credit card processing fees for FY 2015 based on projected credit card revenue for FY 2015.

Developmental Programming and Data Processing
The combined budget for both categories is approximately $4.5M compared to $4.3M in the FY 2014 budget. The 4% combined increase is driven by approved contract increases for data processing services provided by Liaison International and developmental programming support for membership and MedEdPORTAL.

Postage/Freight
The budget is $160K and covers organizational mailings, including all publication and membership materials. It also covers the estimated increases for shipping freight expenses for ADEA’s meeting materials, including the ADEA Annual Session and Exhibition.

Printing/Reproduction
The combined budget for both categories is based on the estimated printing cost for meeting materials and publication. This expense covers all booklets, brochures, flyers, and banners for all ADEA meetings. Printing costs for all ADEA publications, such as the Journal of Dental Education, ADEA Directory of Institutional Members and Association Officers, ADEA Official Guide to Dental Schools, and other documents such as the ADEA House of Delegates Manual.

Rent/Refurbishing
The budget of $786,761 reflects office space rent for ADEA’s current location and projected estimates for rent and refurbishing related to a new lease ADEA will be entering into prior to the end of 2014.

Employee Professional Development
Total employee professional development expenses have increased by 16% from the FY 2013 actual expense and are based on the growth of staff and the growth of programs requiring additional staff training.

Meeting Expense
The budget for meetings expense is $2,379,584 and includes participant food and beverage costs, audio visual equipment, speakers and facilitators, meeting space rental and other meeting related costs for ADEA Fall Meetings, ADEA Deans’ Conference, ADEA BFACA, ADEA Annual Session and Exhibition, in addition to a variety of ADEA conferences. As noted above, there are a number of meetings planned for FY2015 that are new or held in off-years.
Looking Around the Corner

Like all such accounts, this annual report will look back at the recent past, but as you may have noticed, I like to keep my eyes on the road ahead. Over the course of many journeys, I’ve learned that a clear view of the horizon is rarely in sight. More often than not, the road twists and turns as we advance toward our destinations. To arrive there safely, we need to anticipate what we cannot fully see. For those of us in dental education, that means looking around the corner at the issues and trends that will shape our collective future.

Strong winds are buffeting the entire health care delivery system. There’s too much need and not enough access. Patients are demanding safer and more convenient care, and payers are insisting that costs be brought in line with what people and governments can afford.

The Affordable Care Act (ACA) has made these currents visible, but the primary sources of this turbulence have been the demographic and economic forces reshaping the health care system and the market for dental care.

- Dentists are aging out of the workforce at an increasing rate, and dentists, dental hygienists and dental assistants have new partners in providing oral health care.
- A number of states are considering authorizing new oral health providers to treat some dental conditions, and some in pediatric nursing and medicine are already providing some preventive treatments that were once the sole purview of dental professionals.
- Health homes and accountable care organizations have started to gain a foothold, and insurance reforms increasingly favor these arrangements. These changes are putting pressure on the oral health professions to find ways to better integrate dental care within the delivery of health care as a whole.

Within this landscape, both challenges and opportunities are arising, not the least of which is a powerful wave of innovation that is transforming higher education. Fortunately our Association has been looking around the corner, taking note of the terrain and adjusting course to accommodate these unfolding developments. What do we see?

Looking around the corner...

“There is no doubt that solutions to many of the challenges that lie ahead—both clinical and academic—will be found in concert with our colleagues in the other health professions.”

Interprofessional Education and Collaborative Care

An estimated 14% of the U.S. population is now being served by accountable care organizations in which groups of providers and interconnected institutions take collective responsibility for their patients’ health. Although dental practices are not currently integrated within most of these provider groups, this trend toward collaborative practice is unmistakable. Given the inclusion of pediatric dental care as an essential health benefit under the ACA, oral health care will almost certainly become more entwined with the delivery of other health care services, and most people believe that’s a good thing for our patients.

In 2009, ADEA joined with our sister education associations in medicine, nursing, pharmacy and public health to pave the way for the interprofessional delivery of care. As partners in the
Interprofessional Education Collaborative, or IPEC, ADEA members helped draft a set of Core Competencies for Interprofessional Collaborative Practice that have been instrumental in furthering interprofessional education (IPE) at health professions schools and programs throughout North America and indeed the rest of the world.

ADEA has also supported IPE through its financial support and contributions of intellectual capital to the Institute of Medicine (IOM) Global Forum on Innovation in Health Professional Education, which produced one of the year’s most widely read IOM reports. Most recently, we helped establish a place on the web where dental educators can share interprofessional curricular resources. MedEdPORTAL, our collaboration with the Association of American Medical Colleges (AAMC), has furthered interprofessional exposure to oral health education by providing a free, online, peer-reviewed repository for teaching materials. The 2012 launch of the iCollaborative on the MedEdPORTAL site has further enhanced interprofessional collaboration by encouraging faculty and students to share ideas and curricular resources still in development.

IPE also took center stage at this past year’s ADEA Allied Dental Program Directors’ Conference and ADEA CCI Summer Liaisons Meeting. Held consecutively in Portland, OR, these meetings brought the intraprofessional dimension of IPE to the fore. The Chair of the ADEA Board of Directors, Steve Young, and the ADEA Board Director for Allied Dental Program Directors, Susan Kass, and I engaged in dialog on this topic with attendees. We also hosted our first ADEA Allied Dental Accreditation Workshop in Portland earlier the same week. Seventy-five allied program directors attended, and we expect enthusiastic participation when the next two regional workshops are held, one later this spring in Chicago and one in the summer in Los Angeles.

This past December, we took another step in helping faculty prepare students to work in an evolving health care environment. Building on the success of the regional workshop model, which we used in 2012 and 2013 to help our members prepare for accreditation, we held our first ADEA Regional Faculty Development Workshop focused on IPE. The workshop brought together a diverse mix of allied and predoctoral educators eager to better understand the national trend toward collaborative health care delivery and its impact on dental education and practice. Participants learned to facilitate simple IPE exercises and apply best practices for introducing and assessing IPE programs at their home institutions. Two more regional workshops are planned for Chicago and Los Angeles in 2014.

Looking around the corner...
“Statisticians predict a sunny forecast for the dental professions.”

**The Dental Pipeline**

In 2013, dentist topped the list of “The 100 Best Jobs” in the U.S. News rankings, dental hygienist came in at number 10 and dental assistant at 46. That’s great news for our recent and future graduates. What’s more, the U.S. Bureau of Labor Statistics has predicted that dentistry will experience above-average growth of about 21% between 2010 and 2020 and that employment of dental hygienists will rise by 40% in the same period.

To meet this growing demand, 12 new dental schools have opened since 1997, and existing schools have expanded their enrollments. The number of advanced education programs has remained steady, but the number of applicants continues to rise (up 15% in 2013). In recent years, dental hygiene and dental assisting programs have also witnessed strong growth.
Unfortunately, a few clouds also appeared on the horizon last year in the form of a decline in the number of applicants to dental schools. This occurred as other health professions reported that their applicant pools continued to grow. Some of our colleagues have attributed the decline to the rising cost of dental education, the concurrent rise in dental student debt and the limited growth of dental salaries. These may have been contributing factors, but I am confident that the fundamentals of dentistry are sound, and that it remains—and will remain—an attractive career for the foreseeable future.

Of greater concern is the fact that minority applicants constituted much of the decline in the dental school applicant pool. The gains we’ve made in recruiting underrepresented minority students appear to be especially vulnerable to the economic pressures that have challenged society as a whole in recent years. In response, ADEA is working to shore up the applicant pool and ensure its diversity.

In 2012, we hosted our first ADEA Dental School Virtual Fair, a live, three-day event that introduced more than 3,000 people from the United States, Canada and 10 other countries to 33 dental schools. The event was such a success that we repeated it in 2013 and hosted a second virtual fair for advanced dental education programs. We are currently exploring the possibility of conducting virtual fairs more than once a year to extend our reach to additional prospective students.

We also stepped up our game regarding admissions following last year’s U.S. Supreme Court decision that put the onus on universities to demonstrate that the consideration of race in admissions is necessary to achieve the educational benefits of diversity. ADEA worked to provide our member schools with guidance in the wake of the decision, and legal scholar Michael Olivas will discuss how institutions can advocate for the educational benefits of diversity in the current environment at the 2014 ADEA Annual Session & Exhibition.

We have also begun accelerating efforts to develop race-neutral mechanisms schools can use to continue to admit a diverse group of applicants to their programs. A key strategy is to create a set of application questions that look at parental occupation and education. These socioeconomic status variables should prove useful to admissions, student affairs and financial aid officers as they strive to admit a diverse student body. A revised predoctoral dental application containing the new questions is scheduled to go online in June 2014, in time for the 2015 application cycle.

This year, we will offer our ADEA Admissions Committee Workshops at several member schools once again. Developed with the support of the Robert Wood Johnson Foundation (RWJF), these workshops are designed to assist admissions committees in understanding and implementing best practices related to preparing and evaluating candidates for their programs.

Looking around the corner…
“The oral health workforce is becoming more diverse, both demographically and professionally.”

**A More Diverse Oral Health Care Workforce**

For some time now there has been general agreement that in order to meet the growing demand for oral health care, we must diversify the workforce. That will mean expanding opportunities for the dental team, collaborating more with the other health professions and striving to produce a new generation of providers that reflects the population as a whole and is committed to serving those most in need of care.
ADEA has laid a strong foundation for these changes with its multi-pronged approach to reaching a diverse group of students and encouraging them to pursue careers in the health professions. Our award-winning website, ExploreHealthCareers.org, continues to be the number one online destination for those seeking information about careers in the health professions. In response to current trends and in anticipation of future ones, the site continually generates new content on topics of current interest. These range from how to cope with test anxiety to financing a health professions education.

In the year ahead, we will focus on networking with nonprofit community-based organizations to raise awareness of career opportunities in oral health among low-income and minority students. That said, ExploreHealthCareers.org showcases information and resources related to all of the health professions, and in the process, contributes to ADEA’s larger goal of fostering a climate conducive to interprofessional collaboration.

ADEA also has a proud tradition of partnering with foundations to increase diversity within the applicant pool. This year RWJF will celebrate 25 years of recruiting and preparing students from underrepresented and disadvantaged backgrounds to enter schools of the health professions. Through its funding of the Summer Medical and Dental Education Program, the foundation has directly supported 21,000 students and touched the lives of countless more as these individuals have gone on to pursue health care careers. Since 2006, ADEA has worked in collaboration with AAMC to offer this highly respected preparatory program to minority and low-income college students interested in pursuing a career in dentistry or medicine. At the 2014 ADEA Annual Session & Exhibition, nine dental school deans will be honored for their schools’ participation in the program.

These efforts to diversify the workforce go hand-in-hand with a goal we share with our foundation partners: improving access to dental care for underserved populations. Working once again with RWJF, ADEA entered the third phase of the Dental Pipeline initiative in 2012. Since 2002, this RWJF-funded program has addressed disparities in access to dental care by supporting dental schools in developing community-based education programs and recruitment initiatives targeted at underrepresented minority students.

The latest phase of the project, the Dental Pipeline National Learning Institute, has assisted 10 schools in forging strong community partnerships that will advance Pipeline goals. ADEA administers this program in collaboration with the University of the Pacific Arthur A. Dugoni School of Dentistry. The Institute has selected and trained a second cohort of schools that will implement new projects in the coming year.

Diversifying the applicant pool is also a goal of many dental hygiene programs. To assist in this pursuit, we launched the ADEA Dental Hygiene Centralized Application Service (ADEA DHCAS) in 2013. This venture constitutes ADEA’s first foray into the realm of undergraduate applications. The service is free to ADEA member programs, and three dozen of these, including almost half of the graduate dental hygiene programs, used the service in the first year. We hope to double that number in 2014.

Our Association has also worked diligently to ensure that the faculty at member schools and programs reflect the make-up of the population at large. Thanks to generous, multi-year funding from the W.K. Kellogg Foundation, the ADEA Minority Dental Faculty Development (ADEA MDFD) Program has been encouraging members of minority groups to consider academic careers in the oral health professions since 2004. Using a “grow our own” strategy, participating schools have developed novel academic and community partnerships that serve as
powerful recruitment vehicles while reducing oral health disparities in vulnerable communities. The program, now in its third iteration, is taking the lessons it has learned about leadership and the importance of mentoring and applying them to its current endeavor to recruit minority dental educators to careers in academic research.

Of the many faculty development programs ADEA offers, two others also merit mention in this report. Last year, 34 junior faculty made their way to Kennebunkport, ME, to take part in the newly launched ADEA Summer Program for Emerging Academic Leaders. The program, which blends an immersive summer experience with a mentored, year-long, collaborative project, was repeated in 2013 in response to popular demand.

ADEA also devotes considerable energy to encouraging dental students to consider academic careers. Last year, our Association stepped in to fill the void left by the discontinuation of the American Dental Association Student Ambassador program in 2013. Through a series of town hall meetings with members of the student chapters of the National Dental Association, the Hispanic Dental Association and the Society of American Indian Dentists, ADEA staff gathered information about ways our Association can support students in their search for mentorship and leadership development training. The result is a new ADEA Student Diversity Leadership Program scheduled to launch at the 2014 ADEA Annual Session & Exhibition.

Of course, recruiting individuals to academic careers is just a first step. Once individuals elect to pursue academic careers, ADEA supports them with a series of faculty development programs designed to enhance their skills at each phase of their careers. Recognizing that such programs are not always within easy reach, in 2013 we launched the ADEA Faculty of Color Tuition Scholarships for Professional Development with the support of the ADEAGies Foundation and AAL, which operates several of ADEA’s signature leadership programs. This ongoing effort to facilitate the participation of faculty of color in ADEA’s professional development programming speaks to the value our Association places on supporting and retaining individuals once they have been recruited to academic careers.

We are also witnessing an evolution in the practice of dental hygiene. While government statistics indicate that the need for dental hygienists in private practice dental offices will remain strong, many of the profession’s leaders foresee an increased presence of dental hygienists in alternative settings. Some state dental practice acts currently allow patients to directly access at least some dental hygiene services. As more states follow this path, dental hygiene programs may want to take a page out of their own past and increase the training they make available to students in hospitals, public health clinics and other community settings. With this enhanced training, dental hygienists could increase their contribution to meeting the needs of underserved patients.

Outside pressures are altering the face of dental practice as well. Trends suggest that a growing number of dentists will be employed or work within an established large group practice rather than joining a small private practice or starting one of their own. It’s not surprising that the emergence of these large group practices has generated controversy in a profession with a strong entrepreneurial streak, but, like their peers in medicine, a growing number of dental graduates see advantages to treating patients without the added complications of running a business.

Looking around the corner…
“Student debt will continue to be a major concern for higher education and health professions education.”
The High Cost of Education

Dental and dental hygiene education still offer an excellent return on investment, but academic degrees in the oral health professions come at a relatively steep cost. At community colleges, dental hygiene programs are among the most expensive degrees offered, and the price of a dental education in a university setting exceeds that many times over. The average cost of attending dental school has risen 60% since 2000, and dental students are graduating with an average of nearly $222,000 in debt. Despite concerted attempts to address these problems, immediate relief is not in sight.

These unprecedented levels of indebtedness are having an influence on where new dentists choose to practice. Despite the growing need for general dentists, more students are pursuing specialty training hoping to pay off their debt more quickly. While some students are attracted to the loan repayment programs that accompany dental careers in the military and public health, other graduates are less inclined to practice in underserved areas where their lifetime earnings may be less. In addition, some young people are choosing not to enter the oral health professions at all. One reason: the economic realities of the recession years and changes to government loan programs are making it increasingly difficult for economically challenged students to borrow.

In 2012 ADEA responded to this state of affairs by creating the ADEA Presidential Task Force on the Cost of Higher Education and Student Borrowing. In 2013 it issued a report that is guiding our Association’s actions to address these problems. In response to the report’s recommendation that our community promote financial literacy among current and future dental students, ADEA has taken several steps to help students become responsible borrowers. In partnership with AAMC, we created a dental version of that association’s online tool to help medical students plan for and manage their debt. The result is the AAMC/ADEA Dental Loan Organizer and Calculator (AAMC/ADEA DLOC), which became available to ADEA members last fall through our GoDental.org website. AAMC/ADEA DLOC had 240 registered users in the first month, and that number has grown since ADEA invited student financial aid advisors to attend webinars explaining how students can use the tool to track their loans and run repayment scenarios. Although DLOC was designed with dental students in mind, dental residents and allied dental students can also make use of this valuable resource.

Knowing that this problem will require our ongoing commitment, we’ve also created a permanent body to address the issues of student borrowing. The ADEA Student Financial Aid Advisory Committee met for the first time in September 2013. Its members, who deal with the financing side of the educational equation on a daily basis, are expected to bring timely insights and guidance to our community as we continue to wrestle with the cost of higher education. Solving this ongoing problem will also require the involvement of many outside our immediate community. With this in mind, ADEA has made common cause with other organizations dedicated to the health professions and higher education in a joint effort to educate policymakers on the importance of government support for our members’ endeavors.

Looking around the corner …
“Changes to health care coverage and delivery systems will fuel an expanded demand for dental care.”

The Need for a Wider Safety Net

Pediatric dental care has become an essential benefit through the ACA, more children are gaining access to dental coverage through Medicaid and people are living longer, increasing
the overall number of people with oral health needs. These changes are already underway, and as time unfolds and more pieces of the ACA fall into place, we are certain to see even greater demand for dental care.

To meet this exigency, it’s clear that the United States will need a wider safety net. How that safety net—already under strain—can be expanded remains to be seen. These access issues concern our members greatly. ADEA member institutions play a vital role as safety net providers, supplying millions of dollars in subsidized oral health care each year to low-income patients. At present, the reimbursement for that care covers less than 50% of its cost, making it difficult to extend oral health services to all those who need them. ADEA is engaged in conversations with the Obama administration about government support for the care our members provide, and this will continue to be a priority in the years ahead. In particular, funding for the Ryan White HIV/AIDS Program, Part F, Dental Reimbursement Program has been stagnant, while the need to provide oral health care to people with HIV/AIDS continues to increase.

Toward the end of last year, Congress averted a scheduled 2014 reduction in funding for the Ryan White and other safety net programs when it agreed to halt the automatic budget cuts known as sequestration. In January 2014, Congress passed a budget that restored funding for the programs that most impact our members to levels nearing those of fiscal year 2012. Title VII of the Public Health Service Act, which funds training in oral health, the National Institute of Dental and Craniofacial Research (NIDCR) and the CDC Division of Oral Health will all benefit from these developments and so will our members. Nevertheless, we must remain vigilant. According to NDD United, a coalition of organizations concerned about preserving core public services, spending cuts since 2010 to nondefense discretionary (NDD) programs have reduced the share of the U.S. economy going to NDD programs to its lowest level since 1976. This is not a recipe for growth or even for sustained support of oral health workforce programs or the provision of safety net care.

To ensure continued support for the programs we value, we joined the NDD United coalition in 2013 to ask Congress to replace sequestration with a bipartisan, balanced approach to deficit reduction. Moving forward, we will continue to form strategic alliances as we engage in advocacy work on behalf of dental education. In particular, we expect to work with the Health Professions and Nursing Coalition (HPNEC) to ensure that funds authorized under Title VII and Title VIII remain sufficient to support the creation of a health care workforce that is prepared to care for an increasingly diverse population.

Looking around the corner …
“Educators and entrepreneurs are harnessing the power of information technology to transform learning.”

The eLearning Frontier

Although the textbook and the lecture hall may still be visible on most of our campuses for some time to come, they will increasingly look like relics of the 20th century. The Internet has revolutionized the ease with which we acquire knowledge. Mobile devices have changed the ways we share it. And interactive media are allowing us to customize learning in ways that may one day prove as effective as providing a tutor for every student. ADEA members are embracing these developments, and a cadre of eLearning enthusiasts are leading the way in shaping how students will learn in the decades ahead.
To expose our members to ongoing developments on the eLearning frontier, our Association presents regular opportunities for faculty to acquaint themselves with the latest educational technologies. Member-initiated educational programming on teaching and learning with emerging technology, and plenary sessions that help bridge the digital divide between students and faculty, have become regular features of our annual gatherings. For many years, the ADEA TechExpo has created an additional venue where members can explore new technologies face to face. Building on the theme of lifelong learning that we explored together last March, the 2014 ADEA Annual Session & Exhibition will encourage members to look inside the brain and explore the use of technology to facilitate learning. Those members who attended the 2013 ADEA Fall Meetings got a sneak preview of what awaits the rest of us in March. During three days focused on the theme “Embracing Technology in Teaching and Learning,” dental educators talked about their use of information technology in the classroom. Attendees also heard from the Vice President of the National Center for Academic Transformation, who discussed ways that educational institutions are using information technology to redesign learning environments to produce better learning outcomes for students.

Those who attended the 2013 ADEA Deans’ Conference received an additional dose of eLearning insight from representatives of Inside Higher Ed, an online source for higher education news, and Coursera, a leading provider of free online college courses. eLearning was showcased again in December at a meeting of those dental schools that host the Summer Medical and Dental Education Program. Attendees heard about enhancing learning environments from a medical fellow at the Khan Academy, an influential online provider of free K-12 educational content. Those who travel to San Antonio for the 2014 ADEA Annual Session & Exhibition will also have a chance to hear him speak.

As regards our own online educational offerings, last year, the ADEA/AAL Institute for Allied Health Educators (ADEA/AAL IAHE) registered a record number of participants as a result of its expanded roster of courses, made possible by a multi-year unrestricted educational grant of $500,000 from the Colgate-Palmolive Co., the Institute’s exclusive sponsor. More than 100 faculty seeking top-quality course content in a flexible online format responded enthusiastically by enrolling this past fall in the newest course, “Clinical Teaching Best Practices.” The course will be repeated in 2014 along with several established courses and a new program called “Revitalizing Curriculum and Faculty.”

eLearning is one of the brightest developments on the horizon, and I’m sure we’ll be hearing a lot more about it in the years ahead.

Looking around the corner…
“ADEA will play a leading role in shaping the future of dental education. “

Charting the Road Ahead

ADEA not only looks around the corner to anticipate and respond to what lies ahead. Our Association also plays a leading role in shaping the future of dental education, and our commitment to this endeavor remains strong. In the eight years since we launched the ADEA Commission on Change and Innovation in Dental Education (ADEA CCI), we have developed 21st century competencies for predoctoral education and used them to leverage substantial change. Schools have moved to competency-based curricula, the dental boards are now administered on a pass/fail basis and the
Commission on Dental Accreditation (CODA) has put in place new standards for predoctoral dental programs that reflect these shifts.

ADEA CCI has also made our Association a leader among other health professions education associations. Dental education has become a model for those looking to free themselves from the tyranny of teaching to their own licensure tests. Other leaders in health professions education are coming to us for guidance on implementing competency-based curricula.

Most importantly, ADEA CCI has had an unprecedented impact on national policies governing dental education, and these policies have had a reciprocal impact on how we conduct the business of dental education. Changes in the predoctoral curriculum have been profound. Recognizing this transformation, in 2013 CODA asked ADEA to develop a new curriculum survey to make sure that our data collection remains relevant in the years ahead.

As we look to the future, ADEA is also taking concrete steps to ensure the long-term health of academic dentistry. Toward this end, ADEA has been encouraging students, residents and fellows to consider academic careers through a membership campaign that has netted 7,000 individuals in two short years. Moving forward, the campaign will target students, residents and fellows at allied programs and at hospitals that are not affiliated with dental schools. The campaign is heightening awareness of the value of ADEA membership among our younger members, and we hope that this engagement will be reflected in additions to our faculty ranks in the years ahead.

Looking back from where we have come...

“Our Association has a lot to be proud of.”

The accomplishments of recent years truly reflect the contributions of ADEA members of every stripe. Among these are a loyal group of foundation and corporate partners whose ongoing support is allowing us to sustain our established activities and pursue promising strategies to achieve mutual goals. The Robert Wood Johnson Foundation, the W.K. Kellogg Foundation and the Colgate-Palmolive Co. led the way this past year with their extraordinary support for some of the programs mentioned above. The 60 plus members of the ADEA Corporate Council also made generous contributions to our Association through educational grants and sponsorships. These sustain ADEA meetings, leadership programs and an array of scholarships, fellowships and awards all aimed at advancing excellence in dental, allied dental and advanced dental education. The support of these partners has multiplied the impact of our efforts many times over. We owe them a tremendous debt of gratitude.

I also want to express my appreciation for ADEA’s extraordinary volunteer leadership and staff, who conceive and execute the multitude of programs and strategies that are helping our Institutional and Individual Members reach their goals. I am particularly grateful to the members of our ADEA Board of Directors: Steve Young, Jerry Glickman, Lily Garcia, Ryan Hajek, Pam Hughes, Susan Kass, Mike Landers, Valerie Murrah, Elizabeth Roberts and Huw Thomas. I also appreciate the work of the other leaders in our Association who serve on the many internal and external councils, commissions and task forces. They deserve our thanks for their extraordinary service to our Association.

Over the past year ADEA members have developed an impressive track record of looking beyond the parochial boundaries of their individual professions, and they have shown an uncommon willingness to jettison established practices that have outlived their usefulness. This outward and forward-looking vision—this practice of looking around the corner—has served us well. Given the strength of our membership and our extraordinary leaders, I am confident in ADEA’s ability to face the challenges—and seize the opportunities—that lie ahead.
Communications Become Even More Important

Effective communications have and will continue to be a critical measure of success for all that we do as The Voice of Dental Education. With the ever increasing prominence of social media and technology in our lives, the expectations for when and how information is provided have changed significantly. In 2012, ADEA conducted an audit of the various ways our Association communicates with its members. Along the way, one message came through loud and clear: ADEA members want information that is tailored to their specific needs and interests.

To make it clear which communications are intended for particular audiences within the Association membership, ADEA developed a visual communications system, which has been visible on our website and in our publications since late 2013. It uses color and consistent graphics across both print and electronic media to convey the target audience. The new visual communications system will help ADEA’s communications stand out in a crowded landscape of messages vying for our members’ attention.

The audit also led to last year’s consolidation of two ADEA publications with related content. The items that formerly appeared in ADEA Member News now have a home in the redesigned Bulletin of Dental Education (BDE). The merged periodical affords members more streamlined access to news from around the dental education community.

In 2013, ADEA’s flagship publication, the Journal of Dental Education (JDE), began instituting a series of changes that will serve ADEA members well in the years ahead. Subscribers can now download figures from full text articles as PowerPoint slides, enabling readers to easily incorporate JDE figures into their presentations. The slides conveniently contain an article citation as well as ADEA branding, making them ready-for-use upon download.

Last summer ADEA also completed a test version of a JDE mobile app developed with HighWire press. Finished apps for both Apple and Android operating systems are now available in the Apple store and in Google Play. Finally, ADEA is developing a “publish ahead of print” page on the JDE website. Beginning later in 2014, this feature will make information available to JDE readers in a more expeditious manner.
New Chief Administrators at Member Institutions

New Dental School Deans
Since the 2013 ADEA Annual Session & Exhibition, U.S. and Canadian dental schools have appointed the following new deans whose service began between the end of the 2013 ADEA Annual Session & Exhibition and the beginning of the current ADEA Annual Session & Exhibition. The ADEA Board of Directors congratulates these members and wishes them success in their assignments.

- Dr. Leon A. Assael, Dean, University of Minnesota School of Dentistry
- Dr. Ronald J. Dailey, Dean, Loma Linda University School of Dentistry
- Dr. William W. Dodge, Dean, University of Texas Health Science Center at San Antonio Dental School
- Dr. Rena N. D’Souza, Dean, University of Utah School of Dentistry
- Dr. Cherae M. Farmer-Dixon, Dean, Meharry Medical College School of Dentistry
- Dr. G. William Knight, Executive Associate Dean, Faculty Development, University of Illinois at Chicago College of Dentistry
- Dr. Carol A. Lefebvre, Dean, Georgia Regents University College of Dental Medicine
- Dr. Frank W. Licari, Dean, Roseman University of Health Sciences College of Dental Medicine – South Jordan, Utah
- Dr. Phillip T. Marucha, Dean, Oregon Health & Science University School of Dentistry
- Dr. Laurie K. McCauley, Dean, University of Michigan School of Dentistry
- Dr. Linda C. Niessen, Dean, Nova Southeastern University College of Dental Medicine
- Dr. Christian S. Stohler, Dean, Columbia University College of Dental Medicine

New Federal Dental Chiefs
U.S. federal government agencies have reported the following appointments since the 2013 ADEA Annual Session & Exhibition. The Board of Directors congratulates these new Dental Service Chiefs:

- Col. Drew W. Fallis, Dean, Graduate Dental Education, U.S. Air Force Dental Service
- Dr. Patrick D. Sculley, Executive Dean, Post Graduate Dental College, Uniformed Services University of the Health Sciences

Other New Administrators at Member Institutions
Other ADEA Member Institutions have reported the following appointments since the 2013 ADEA Annual Session & Exhibition. The Board of Directors congratulates these new administrators.

- Dr. Noel J. Aymat, Acting Dean, University of Puerto Rico School of Dental Medicine
- Dr. Eli Eliav, Director of Eastman Institute for Oral Health, University of Rochester Medical Center
- Dr. Lilly T. Garcia, Associate Dean for Education, The University of Iowa College of Dentistry & Dental Clinics
- Dr. James J. Koelbl, Provost and Senior Vice President, University of New England College of Dental Medicine
- Dr. Mark Penn, Acting Dean through October 2013, Roseman University of Health Sciences College of Dental Medicine – South Jordan, Utah
- Dr. Mark A. Reynolds, Interim Dean, University of Maryland School of Dentistry
- Dr. Boyd E. Robinson, Interim Dean, University of Florida College of Dentistry
• Dr. Kenneth Sutherland, Acting Dean, University of Saskatchewan College of Dentistry
• Dr. Laureen Zubiaurre Appointed Associate Dean for Admissions and Student Affairs at Columbia University College of Dental Medicine

New Institutional Members
Since March 18, 2013, these schools were installed as Active Institutional Members:
• University of Utah School of Dentistry
• Missouri School of Dentistry & Oral Health

New Affiliate Members
Since March 18, 2013, these programs and schools have become Affiliate Members. The ADEA Board of Directors welcomes them.

Federal
• Uniformed Services University of the Health Sciences, MG (Ret) Patrick D. Sculley, Executive Dean, Post Graduate Dental College, (San Antonio, TX)

Allied
• University of Arkansas for Medical Sciences, Prof. Melissa Efurd, Chair, Dental Hygiene Program, (Little Rock, AR)
• Fortis College in Phoenix, Prof. Lori Riedel, Program Director, Dental Hygiene, (Phoenix, AZ)
• Carrington College California – Sacramento, Dr. Sharon Golightly, Program Director, Dental Hygiene, (Sacramento, CA)
• Carrington College California – San Jose, Prof. Sherry Heaney, Program Director, Dental Hygiene, (San Jose, CA)
• Sacramento City College, Prof. Jim Collins, Dean, Science and Allied Health Division, (Sacramento, CA)
• Pikes Peak Community College, Prof. Amy Reed, Department Chair, Dental Assisting, (Colorado Springs, CO)
• University of Hawaii Maui College, Prof. Joyce T.U. Yamada, Program Director, Dental Assisting, (Kahului, HI)
• Harper College, Prof. Kathleen Hock, Program Director, Dental Hygiene, (Palatine, IL)
• Mid-Plains Community College, Prof. Lauri A. Rickley, Program Director, Dental Assisting, (North Platte, NE)
• St. Joseph’s Regional Medical Center, Dr. Hillel Ephros, Chairman and OMS Program Director, (Paterson, NJ)
• Oregon Institute of Technology, Prof. Jill L. Schultz, Chair, Dental Hygiene Department, (Klamath Falls, OR)
• University of South Dakota - School of Health Sciences, Prof. Ann Brunick, Dental Hygiene Program Director, (Vermillion, SD)
• Northeast Texas Community College, Dr. Debra Jo Johnson, Program Director, Dental Hygiene, (Mt Pleasant, TX)
• J. Sargeant Reynolds Community College School of Nursing and Allied Health, Mr. Don O’Donohue, Assistant Dean, (Richmond, VA)
• Nicolet College, Kenneth Urban, VP Teaching, Learning & Student Success, (Rhinelander, WI)
New Corporate Members

These companies have become ADEA Corporate Members since March 18, 2013. The ADEA Board of Directors welcomes them.

- Dr. Harold Katz, LLC, Ms. Brienne Arroyo, Marketing Manager, TheraBreath, (Los Angeles, CA)
- Mr. Alan D. Johns, Vice President, Tyler & Company, (Atlanta, GA)
- Mr. William Hartman, Executive Vice President, Quintessence Publishing, (Hanover Park, IL)

The ADEA Board of Directors welcomes all.
In Memoriam

With regret, the ADEA Board of Directors announces these deaths of faculty and staff as reported by ADEA Member Institutions.

Dr. J. Hayden Abbott, University of Missouri – Kansas City School of Dentistry
Dr. William M. Allen, The University of Texas School of Dentistry at Houston
Dr. Robert Avakian, Ostrow School of Dentistry of the University of Southern California
Dr. Edward Babits, Midwestern University College of Dental Medicine-Arizona
Dr. Carlos Castro Barrera, Tufts University School of Dental Medicine
Dr. Roy W. Bell, The University of Texas School of Dentistry at Houston
Dr. Ian C. Bennett, University of Medicine and Dentistry of New Jersey and Dalhousie University Faculty of Dentistry
Dr. Ian Bennett, Faculty of Dentistry at Dalhousie University
Dr. Hector Bethart, University of Florida College of Dentistry
Dr. William H. Binnie, Texas A&M University Baylor College of Dentistry
Dr. Maurice Blonstein, The University of Texas School of Dentistry at Houston
Dr. Randolph R. Brantly, The University of Texas School of Dentistry at Houston
Dr. Earl Broker, Albert Einstein Medical Center in Philadelphia
Dr. Arthur Brown, Oregon Health & Science University School of Dentistry
Dr. Eugene Buatti, University of Michigan School of Dentistry
Dr. Herbert Butts, University of Tennessee Health Science Center College of Dentistry
Dr. James R. Campbell, The University of Texas School of Dentistry at Houston
Dr. Lawrence I. Carnes, University of Louisville School of Dentistry
Dr. Lawrence Churgin, Rutgers School of Dental Medicine
Dr. John Devin Cochran, The University of Texas School of Dentistry at Houston
Dr. Robert S. Conrad, The University of Texas School of Dentistry at Houston
Dr. Raymond Contino, Ostrow School of Dentistry of the University of Southern California
Dr. James Crawford, University of North Carolina at Chapel Hill School of Dentistry
Dr. Sheila Dashkow, Rutgers School of Dental Medicine
Dr. Victor E. Della-Giustina, Georgia Regents University College of Dental Medicine
Dr. Dominick DePaola, Nova Southeastern University College of Dental Medicine and Harvard School of Dental Medicine
Dr. Norman Diamond, Tufts University School of Dental Medicine
Dr. Larry A. Dornburg, The University of Texas School of Dentistry at Houston
Dr. Harry L. Dougherty, Ostrow School of Dentistry of the University of Southern California
Dr. Dale R. Eisenmann, University of Illinois at Chicago College of Dentistry
Dr. Edward W. Farrell, Indiana University School of Dentistry
Dr. David Ferguson, University of Missouri – Kansas City School of Dentistry
Dr. George Ferry, University at Buffalo School of Dental Medicine
Dr. Philip H. Feser, The University of Texas School of Dentistry at Houston
Dr. Herbert Fine, Harvard School of Dental Medicine
Dr. Michael Finkelstein, The University of Iowa College of Dentistry & Dental Clinics and University of Minnesota School of Dentistry
Dr. Henri Bourdon Ford, Louisiana State University School of Dentistry
Dr. Ralph Frankson, The University of Texas School of Dentistry at Houston
Dr. George Gamboa, Ostrow School of Dentistry of the University of Southern California
Dr. George Garrington, University of Florida College of Dentistry
Dr. Thomas E. Gibson Jr., The University of Texas School of Dentistry at Houston
Dr. Carroll C. Gillespie, The University of Texas School of Dentistry at Houston
Dr. James J. Guiberteau, The University of Texas School of Dentistry at Houston
Dr. Anne Haffajee, Harvard School of Dental Medicine
Ms. Shirah L. May Hall, The University of Texas School of Dentistry at Houston
Dr. Darrell V. Hawkins, The University of Texas School of Dentistry at Houston
Dr. Marvin Hirsh, Texas A&M University Baylor College of Dentistry
Dr. Mitch Hungate, University of Washington School of Dentistry
Dr. Thomas L. Hurst, The University of Texas School of Dentistry at Houston
Dr. Taline Infante, University of Texas Health Science Center at San Antonio Dental School
Dr. Rex Ingraham, Ostrow School of Dentistry of the University of Southern California
Dr. Dean Johnson, University of Oklahoma College of Dentistry
Dr. William H. Jolley, University of Tennessee Health Science Center College of Dentistry
Dr. Leopold (Leo) Klausner, University of Michigan School of Dentistry
Dr. Vincent G. Kokich, University of Washington School of Dentistry
Dr. Dan Kolzet, University of North Carolina at Chapel Hill School of Dentistry and Ostrow School of Dentistry of the University of Southern California
Dr. Hugh M. Kopel, Ostrow School of Dentistry of the University of Southern California
Dr. William S. Kramer, University of Nebraska Medical Center College of Dentistry
Dr. Cory Kruckenberg, Midwestern University College of Dental Medicine-Arizona
Dr. Bill Kuebker, University of Texas Health Science Center at San Antonio Dental School
Dr. Judith Lampasso, University at Buffalo School of Dental Medicine
Dr. Hannelore Loey, University of Illinois at Chicago College of Dentistry
Dr. Theodore E. Logan, Sr., University of Louisville School of Dentistry
Dr. Stacy Lomeli, University of California, San Francisco, School of Dentistry
Dr. Stanley Lotzkar, University of Florida College of Dentistry
Dr. Robert L. Lyle, The University of Texas School of Dentistry at Houston
Dr. Harry Lundeen, University of Florida College of Dentistry
Dr. Charles Mahan, The University of Texas School of Dentistry at Houston
Dr. Ron Mahn, Marquette University School of Dentistry
Dr. Alexander Makeyev, University of Connecticut School of Dental Medicine
Dr. Frank Mastrola, Harvard School of Dental Medicine
Dr. Stephen Matteson University of Texas Health Science Center at San Antonio Dental School
Dr. James L. “Jack” McClendon, The University of Texas School of Dentistry at Houston
Dr. Harry E. McGee, Jr., University of Nebraska Medical Center College of Dentistry
Dr. Wendell McLin, Oregon Health & Science University School of Dentistry
Dr. Herbert Dean Millard, University of Michigan School of Dentistry
Dr. Alvin L. Morris, University of Kentucky College of Dentistry
Dr. Russell Nisengard, University at Buffalo School of Dental Medicine
Dr. J.D. Overton, University of Texas Health Science Center at San Antonio Dental School
Dr. Gonzalo I. Pardo, Stony Brook University School of Dental Medicine
Dr. Dan Patrick, Germanna Community College
Dr. Ben Pavone, University of California, San Francisco, School of Dentistry
Dr. Don Pricco, Marquette University School of Dentistry
Dr. William J. Roberts, The University of Texas School of Dentistry at Houston
Dr. Anthony Romano University of Minnesota School of Dentistry
Dr. Ken Rudd, University of Texas Health Science Center at San Antonio Dental School
Dr. S.P. Scavotto, Harvard School of Dental Medicine
Dr. Duane A. Schmidt, The University of Iowa College of Dentistry & Dental Clinics
Dr. Kumar Shanmugam, New York University College of Dentistry
Dr. Elliot Shulman, West Virginia University School of Dentistry
Dr. James Simon, Ostrow School of Dentistry of the University of Southern California
Dr. David Singer University of Manitoba Faculty of Dentistry
Dr. Dale E. Smith, University of Washington School of Dentistry
Dr. Eugene Spiegel, University of Florida College of Dentistry
Dr. Harvey Sprowl, University at Buffalo School of Dental Medicine

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Dr. Robert L. St. John, The University of Texas School of Dentistry at Houston
Dr. Harold Stanley, University of Florida College of Dentistry
Dr. Gordon L. Stastry, University of Illinois at Chicago College of Dentistry
Dr. Lucas Stevens, University of Florida College of Dentistry
Dr. Mark A. Strauch, University of Maryland School of Dentistry
Dr. John Streiff, Marquette University School of Dentistry
Dr. William Stutzel, New York University College of Dentistry
Dr. Henry M. Swenson, Indiana University School of Dentistry
Dr. Bill C. Terry, University of North Carolina at Chapel Hill School of Dentistry
Dr. Raymond J. Unland, Louisiana State University School of Dentistry
Dr. Arthur Van Stewart, University of Louisville School of Dentistry
Dr. Gerald L. Vale, Ostrow School of Dentistry of the University of Southern California
Dr. Cullen C. Ward, Indiana University School of Dentistry
Dr. William Phillip (Phil) Webster, University of North Carolina at Chapel Hill School of Dentistry
Dr. Jordan Weigler, Marquette University School of Dentistry
Dr. E. Durwood Wheatley, The University of Texas School of Dentistry at Houston
Dr. Shannon Wong University of the Pacific, Arthur A. Dugoni School of Dentistry
Dr. Ralph Yuodelis, University of Washington School of Dentistry
Dr. Oreste D. Zanni, Boston University Henry M. Goldman School of Dental Medicine
Preamble

The American Dental Education Association (ADEA) is incorporated as a District of Columbia nonprofit corporation and as such is subject to the District of Columbia Nonprofit Corporation Code. As established by its Articles of Incorporation, the purpose of the Association is to advance and support dental education, dental research and the dental health and education of the general public, and it is recognized by the Internal Revenue Service as a 501(c)(3) organization.

Chapter I: The House of Delegates—The ADEA Governing Body

A. Function, Powers, Obligations and Duties

1. Functions, Powers and Obligations. The House of Delegates is the Association’s governing and legislative body. The House of Delegates manages the property, business and affairs of the Association in accordance with these Bylaws and the purposes of the Association, and has the power:
   a) To enact and, where appropriate, enforce policies of the Association;
   b) To approve all resolutions in the name of the Association;
   c) To elect Active, Provisional and Honorary Members;
   d) To approve changes to the Bylaws, Policy Statements and Position Papers;
   e) To approve new sections;
   f) To approve the Association’s operating budgets;
   g) To establish branch offices of the Association or change the location of the ADEA Headquarters;
   h) To elect the Chair-elect of the Board of Directors of the Association;
   i) To elect nominees for representation in other organizations when so requested; and
   j) To serve as an advocate on behalf of all Association policies and positions.

2. Duties. As the ADEA governing body, pursuant to the District of Columbia Nonprofit Code, members of the House of Delegates, are expected to discharge their duties in good faith with the care an ordinarily prudent person in a like position would exercise under similar circumstances in a manner the Delegate reasonably believes to be in the best interests of the Association; and in doing so to disclose to their fellow Delegates known information relevant to the issues being considered by the House of Delegates.

B. Composition

The House of Delegates is comprised the following:

1. The Officers;
2. The Council of Deans as represented by all of its members;
3. The Council of Faculties as represented by all of its members;
4. The Council of Allied Dental Program Directors is represented by its Administrative Board and one Delegate for every 10 of its member programs (or major portion thereof) in each of its four membership categories—dental assisting education, dental hygiene education, dental laboratory technology education and advanced allied dental education. Each category is represented by at least two Delegates.
5. The Council of Hospitals and Advanced Education Programs (COHAEP) is represented by its Administrative Board, one representative from each of the ADA-recognized dental
specialties, two representatives from advanced education in general dentistry programs plus one delegate for every 10 COHAEP member programs. COHAEP shall have at least 16 Delegates;

6. The Council of Sections is represented by each Section’s Councilor, Section Chair and its Administrative Board members. If a Section Councilor and/or Section Chair is unable to serve as a Delegate in the House of Delegates, he or she may appoint either the current Section Chair-elect or Section Secretary to be ratified to serve as the alternate Delegate;

7. The Council of Students, Residents and Fellows is represented by each Section’s Councilor, Section Chair and its Administrative Board members. If a Section Councilor and/or Section Chair is unable to serve as a Delegate in the House of Delegates, he or she may appoint either the current Section Chair-elect or Section Secretary to be ratified to serve as the alternate Delegate;

8. The Corporate Council is represented in the House of Delegates by its Administrative Board.

9. Delegate Selection
   a) All members of the Council of Deans serve as Delegates to the House of Delegates.
   b) All members of the Council of Faculties serve as Delegates to the House of Delegates. Members are elected or appointed by their institution.
   c) The Council of Allied Dental Program Director’s Delegates to the House of Delegates are nominated by members of the Council and approved by the Council’s Administrative Board. The Administrative Board also serves as Delegates to the House of Delegates.
   d) The Council of Hospitals and Advanced Education Program’s Delegates to the House of Delegates include representatives from the dental specialties who are nominated and reviewed by the Council’s Administrative Board. Delegates that represent programs may self-nominate or are nominated by the Council’s Administrative Board. Delegates are appointed by the Council’s Administrative Board.
   e) The Council of Sections Delegates to the House of Delegates include the Councilor and Chair of each Section. The members of the Administrative Board also serve as Delegates to the House of Delegates.
   f) The Council of Students, Residents and Fellows elects Delegates at the ADEA Annual Session & Exhibition. Each member institution represented at the Council meeting to elect Delegates gets one vote.
   g) The Corporate Council Delegates to the House of Delegates consist of the Council’s Administrative Board.

C. Meetings of the House of Delegates

1. Annual Session & Exhibition. The House of Delegates normally convenes at the Association’s Annual Session & Exhibition. The President and CEO sends each Delegate an official notice of the time and place of each Annual Session & Exhibition or other House of Delegates meeting electronically or via postal mail. The notice is sent no fewer than 30 days before the first day of the meeting.

2. Special Meetings. Special Meetings may be called by the Chair of the Board or by request of the membership as specified in the Bylaws, Chapter III, Section C.2. The President and CEO sends each Delegate an official notice of the time and place of each Special Meeting along with a statement of the business to be considered. The notice is sent electronically or via postal mail no fewer than 30 days before the first day of the Meeting. No other business except that provided for in the call may be considered unless the members present unanimously agree to consider additional business.
3. **Quorum.** A majority of the House of Delegates or any of its committees constitutes a quorum for the transaction of business at regular or special meetings.

4. **Order of Business in Meetings.**
   a) **Regular Meeting:** The order of business at a regular Meeting of the House of Delegates is as follows, unless changed by a two-thirds vote by the Delegates.
      1. Call to order;
      2. Report of quorum by President and CEO;
      3. Approval of minutes of previous Meeting;
      4. Reports of Officers;
      5. Report of the Board of Directors;
      6. Referrals of reports and resolutions;
      7. Action on resolutions;
      8. Unfinished business;
      9. New business;
     10. Installation of Officers; and
     11. Adjournment.
   b) **Special Meeting:** The order of business at a Special Meeting is as follows:
      1. Call to order;
      2. Report of quorum by President and CEO;
      3. Reading of call for Special Meeting;
      4. Transaction of business as provided in call; and
      5. Adjournment.

5. **Procedures Regarding Resolutions.**
   a) Resolutions may be presented to the House of Delegates either by the Board of Directors or by any Delegate in writing up to and including the Opening of the House of Delegates.
   b) Any Individual Member may submit a resolution to the Board of Directors by December 1, prior to the next ADEA Annual Session & Exhibition, which in its discretion may or may not choose to forward it for further consideration.
   c) Resolutions not brought before the last Board of Directors meeting prior to the Annual Session & Exhibition may be introduced at the Opening of the House of Delegates and must be presented by a Delegate.
   d) Resolutions brought after the Opening of the House of Delegates cannot be considered by the House until the following year. The resolution can be sent immediately after the ADEA Annual Session & Exhibition to the President and CEO, who then presents it to the Board of Directors for consideration before the next ADEA Annual Session & Exhibition.
   e) At its discretion, the Board of Directors may submit resolutions to an appropriate Association component group for advice before forwarding the resolution to the House of Delegates.
   f) Annually, the Board of Directors appoints Reference Committee Members to hold hearings at the ADEA Annual Session & Exhibition on resolutions being presented to the House of Delegates and to make recommendations on those resolutions upon request of the Board of Directors.
   g) Resolutions proposing expenditure of Association funds must be accompanied by a cost impact statement estimating the amount of funds required and the period of expenditure.
   h) Resolutions proposing changes in the ADEA policies and Bylaws must specify how the ADEA Policy Statements, Position Papers and Bylaws would be affected.
6. **Removal.** A member of the House of Delegates may be removed with or without cause upon a majority vote of the Delegates whenever in the Delegates’ judgment the best interest of the Association would be served thereby, provided that all the Delegates have at least 21 days’ notice of the proposed removal and the Delegate at issue has an opportunity to address the House of Delegates personally, either by phone, in-person or electronically as determined by the discretion of the Board of Directors.

**Chapter II: The Association’s Officers**

**A. Officers.**

The Association’s Elected Officers and *ex officio* Officers are as follows and, per Chapter III below, function as the Association’s Executive Committee:

1. Chair of the Board
2. Chair-elect of the Board (who serves *ex officio* as Secretary)
3. Immediate Past Chair of the Board (who serves *ex officio* as Treasurer)
4. Board Director for Allied Dental Program Directors
5. Board Director for Deans
6. Board Director for Faculties
7. Board Director for Hospitals and Advanced Education Programs
8. Board Director for Sections
9. Board Director for Students, Residents and Fellows
10. Board Director for the Corporate Council
11. President and CEO (*ex officio*, voting)
12. In addition, the House of Delegates may from time to time appoint or authorize the President and CEO to appoint assistant Officers such as an Assistant Secretary or an Assistant Treasurer.

**B. Qualifications.**

To qualify for and serve as an Elected Officer, a person must be: an Individual Member of the Association, a member of the Council for which he or she serves as a Board Director, employed by, matriculated at or appointed to a Commission on Dental Accreditation-approved program and satisfy any other Council-specific criteria.

**C. Duties and Responsibilities of Officers**

1. **Duties in General.** Officers shall have such authority and shall perform such responsibilities as may be provided in these Bylaws or by resolution of the Board of Directors, subject to the control of the Board of Directors. Pursuant to the District of Columbia Nonprofit Code, Officers are expected to discharge their duties in good faith, with the care an ordinarily prudent person in a like position would exercise under similar circumstances, in a manner the Officer reasonably believes to be in the best interests of the Association; and to disclose relevant known information and any actual or probable material violation of law involving the Association or material breach of duty to the Association by an Officer, employee, or agent of the Association, that the Officer believes has occurred or is likely to occur.
2. **Duties of Specific Officers.**

   a) The Chair of the Board shall provide leadership in achieving the Association’s mission, objectives, and ongoing business; to serve as presiding Officer of the House of Delegates and Board of Directors; and to supervise all of the affairs of the Association in accordance with the policies and directives approved by the Board of Directors.

   b) The Chair-elect of the Board is to serve in place of the Chair of the Board at the request of the Chair or in the absence of the Chair; and to perform any duties requested by the Chair of the Board.

   c) The Immediate Past Chair of the Board serves in place of the Chair of the Board at the request of the Chair or Chair-elect of the Board, or in the absence of both; to perform any duties requested by the Chair of the Board; to Chair the Finance Committee of the Board of Directors; and to Chair the Nominating Committee for Chair-elect of the Board.

   d) The Secretary shall cause there to be a process managed by the President and CEO for keeping the minutes of all meetings of the Board of Directors, including all votes and resolutions adopted, and shall cause there to be a process to record all such documents and records (in print or electronically) in a medium kept for that purpose. The Secretary will cause there to be a process managed by the President and CEO for issuing notices of all Board of Directors meetings, filing of all reports required by governmental authorities and performing such other functions and duties as the Board may from time to time prescribe.

   e) The Treasurer as the Chair of the Finance Committee will cause there to be a process to ensure the safe custody of all funds, securities and assets of the Association and the preparation of financial reports. He or she will cause there to be a process by the Finance Committee to review and approve an annual budget for the Association, conduct regular reviews of the Association’s financial statements and progress against the budget, oversee Association investments and review the annual financial audit and reports required by governmental authorities. The Board of Directors may appoint and empower such Assistant Treasurers as shall be required to carry out the purpose of this section.

   f) Each Board Director represents an Association Council and, in addition to fulfilling the duties in this subsection, fulfills the responsibilities set forth in Chapter VII (Councils) of these Bylaws. The Board Directors are nominated according to procedures set forth in Chapter VIII (Councils) of these Bylaws.

D. **Nominating and Electing the Chair-elect**

1. **Nominating the Chair-elect of the Board.** Annually, the Board of Directors shall constitute a Nominating Committee, chaired by the Immediate Past Chair of the Board, to nominate one or more candidates for Chair-elect of the Board. The Committee shall receive and consider nominations from the general membership, Council Administrative Boards and Delegates, and shall recommend one or more candidates to stand for election.

   Any member may make nominations according to the timetable and procedures set forth in the Policy on Nominations for Chair-elect of the Board.
2. **ELECTING THE CHAIR-ELECT OF THE BOARD OF DIRECTORS.** If there is only one candidate for Chair-Elect of the Board, he or she is declared elected at the Opening of the House of Delegates. If there are two or more candidates, the members of the House of Delegates shall cast ballots at the Annual Session & Exhibition during times designated by the Board of Directors. Voting for the Chair-elect of the Board will be conducted by a process determined by the Board of Directors. A majority vote is required for election.

E. **TERMS OF OFFICE, SUCCESSION, INSTALLATION, REMOVAL, FILLING VACANCIES**

1. **TERMS OF OFFICE.** The term of office of any Officer shall be as follows, but shall not terminate until: (a) the installation of a successor, (b) the effective date of his or her resignation submitted in writing to the Secretary or Chair of the Board, (c) upon his or her death or (d) upon removal from Office in accordance with the provisions of these Bylaws.

2. **SUCCESSION.** The Chair-elect of the Board automatically succeeds to the office of Chair of the Board, and the Chair of the Board automatically succeeds to the office of Immediate Past Chair of the Board. The Chair-elect of the Board, Chair of the Board and Immediate Past Chair of the Board serve one-year terms. After serving a term in any such position, they are ineligible to serve again in any of those offices.

3. **INSTALLATION.** The other elected Association Officers are installed at the ADEA Annual Session & Exhibition at the Closing Session of the House of Delegates. The Board Directors serve a single three-year term, except that the Board Director for Students, Residents and Fellows shall serve a term of office specified in Chapter VII, Section B.7 of these Bylaws. Board Directors are ineligible to succeed themselves in the same role.

4. **REMOVAL.** Any elected Officer may be removed from office, with or without cause, upon a vote of a majority of the Board of Directors Members then in office, whenever in the Board of Directors Members’ judgment the best interest of the Association would be served thereby, provided that all the Board of Directors Members have at least 10 days’ notice of the proposed removal and the Officer at issue has an opportunity to address the Board of Directors prior to the removal vote either in person, electronically or via a telephone meeting, as determined in the discretion of the Board of Directors. Any Officer appointed by the Chair of the Board may be removed by the Chair of the Board.

5. **FILLING VACANCIES.**
   a) If either the Chair of the Board or Chair-elect of the Board dies, resigns or is removed for any reason, the Association’s Nominating Committee shall nominate one or more candidates and conduct an election by ballot to fill that vacancy by vote of the last House of Delegates, to be held electronically, such as by email, or by postal mail, as determined in the discretion and according to procedures set forth by the Board of Directors. A majority of the votes cast is required for election.
   b) If an Immediate Past Chair of the Board dies, resigns or is removed for any reason, the position remains vacant until the Chair of the Board assumes the office at the next ADEA Annual Session & Exhibition, except that the Chair of the Board may appoint the most recent Immediate Past Chair of the Board, if he or she is willing, to serve as the Immediate Past Chair of the Board until the next ADEA Annual Session & Exhibition when the Chair of the Board assumes such office.
c) If a vacancy in the office of Immediate Past Chair of the Board is not filled, the Chair of the Board serves as Chair of the Finance Committee and the Nominating Committee for the Chair-Elect of the Board.

d) In the event of the death, resignation or removal of one or more of the Board Directors, the vacancy shall be filled in accordance with the procedures set forth in Chapter VII, Section B.8 of these Bylaws.

Chapter III: Board of Directors

A. Composition and Function.

The Board of Directors is comprised of the Officers of the Association and functions as the Association's Executive Committee.

B. Powers and Duties.

The Board of Directors has the power to engage in the oversight in the business affairs of the Association, including the following powers and duties:

1. To serve as the Association’s Executive Committee;
2. When the House of Delegates is not in session, to establish ad hoc interim policies, rules and regulations, provided that such policies are not in conflict with existing Association policy and Bylaws and are presented for review at the next Meeting of the House of Delegates;
3. To report its actions to the House of Delegates at each Annual Session & Exhibition;
4. To conduct the Association’s planning, including the development of strategic, operational and related plans, and to apprise the House of Delegates of those plans;
5. To nominate: (a) a candidate(s) for ADEA Chair-elect of the Board, (b) candidates for honorary membership and (c) candidates for membership in other organizations, as well as to appoint representatives to other organizations;
6. To appoint and evaluate the President and CEO;
7. To ensure that all accounts of the Association are audited annually;
8. For each ADEA Annual Session & Exhibition, to prepare and submit an annual operating budget for the following fiscal year to the House of Delegates for approval;
10. To establish branch offices of the Association or change the location of the ADEA Headquarters.

C. Meetings

1. Regular Meetings. The Board of Directors normally meets at least four times a year upon at least 10 days’ notice, sent electronically or via postal mail, either in person or by teleconference.

2. Special Meetings. The Chair of the Board of Directors may call a Special Meeting at the request of at least three Board of Directors members, provided that notice of the Special Meeting is sent electronically or via postal mail to each member at least 10 days' before the meeting by the President and CEO. No other business, except that provided for in the call, may be considered unless the members present unanimously agree to consider additional business.
Chapter IV: Governance Procedures

The following provisions apply to the members and committees of the House of Delegates and the Board of Directors.

A. Leadership.

The following officials have the described leadership roles at the Meetings of the House of Delegates:

1. **Presiding Officer.** The Chair of the Board is the presiding Officer. In the absence of the Chair of the Board, the Chair-elect of the Board is the presiding Officer. In the absence of both, past Chairs of the Board, in reverse order of service, are called on to preside.

2. **Recording Officer.** The President and CEO is the recording Officer and custodian of the House of Delegates records. Staff and/or a professional recorder may be used to obtain a record of the House of Delegates proceedings. The President and CEO ensures that a record of the proceedings is published annually in the Association’s Proceedings.

3. **Parliamentarian.** The President and CEO appoints the Parliamentarian.

B. Quorum.

A majority of the membership of the Board, or any Committee of the Board, constitutes a quorum for the transaction of business for that entity.

C. Manner of Acting.

A majority of the votes cast on a matter where a quorum is present shall be necessary for the adoption thereof unless a greater proportion is required by law or these Bylaws.

D. Alternative Action.

Any action required by law to be taken at a meeting may be taken without a meeting if a consent in writing, setting forth the action so taken, is signed by (or sent by electronic means) all of those entitled to vote with respect to the subject matter thereof with the consent effective upon receipt of the last Director’s or Delegate’s consent, unless the consent form specifies a different effective date. Any requirement in these Bylaws that there be a writing or something in written form is satisfied by email or any form of communication inscribed on a tangible medium or that is stored in an electronic or other medium and is retrievable in perceivable form.

E. Meetings Held in Whole or Part Through the Use of Telecommunications.

Anyone who participates in a governance or committee meeting by means of a conference telephone or other telecommunications device which allows all persons participating in the meeting to hear each other and such participation in a meeting shall be deemed present in person at such meeting.
F. Emergency Powers.

In an emergency such that a quorum of the Delegates or the Board of Directors cannot readily be assembled because of some catastrophic event, the Board of Directors may modify the lines of succession to accommodate the incapacity of any Director, Officer, employee or agent and may relocate the principal office, designate alternative principal offices or regional offices or authorize the Officers to do so, may give notice of a meeting only to those whom it is practicable to reach and may be given in any practicable manner, may designate one or more Association Officers in order of rank and within the same rank in order of seniority to be Directors for a Board of Directors meeting, and may take corporate action in good faith during an emergency to further the ordinary affairs of the nonprofit corporation, which although binding on the Association, shall not be used to impose liability on a Director, Officer, employee, or agent.

Chapter V: Committees

A. In General.

The Board of Directors or House of Delegates, by resolution adopted by a majority of the Directors or Delegates in office, may designate and appoint one or more committees and their members. Each committee that exercises the authority of the Board of Directors or House of Delegates shall be referred to as a Governance Committee, and shall consist of two or more Board of Directors members or Delegates and of only Board of Directors members. Each Governance Committee, to the extent provided in said resolution, shall have and exercise the authority of the Board of Directors or House of Delegates in the management of the Association, except that no such committee shall have the authority of the Board of Directors or House of Delegates in reference to: amending, altering or repealing the Articles of Incorporation or Bylaws; electing, adopting a plan of merger, dissolution, consolidation or approving the sale, exchange, mortgage or distribution of all or substantially all of the property and assets of the Association; amending, altering or repealing any resolution of the Board of Directors or House of Delegates. Committees that include non-Directors and non-Delegates are considered Advisory Committees.

B. The Finance Committee.

The Finance Committee consists of the Immediate Past Chair of the Board, who is Chair, and the Chair of the Board and Chair-elect of the Board. The Finance Committee is responsible for assisting the President and CEO in preparing the Association’s budget, monitoring the Association’s finances and reporting progress and recommendations to the Board of Directors and House of Delegates. The Finance Committee meets as requested by the Board of Directors and normally in conjunction with Board meetings. The Finance Committee functions as the Audit Committee.

C. Nominating Committee.

The Nominating Committee consists of the Immediate Past Chair of the Board, who will serve as Chair of the Committee, and seven Board Directors, to nominate one or more candidates for Chair-elect of the Board. The Committee shall receive and consider potential nominations from the general membership, Council Administrative Boards and Delegates.

D. Other Standing and Special Committees.

The Board of Directors or the House of Delegates may appoint Standing and Special Committees to assist in performing its duties. Committees of the Board of Directors and House of Delegates shall have two or more Directors or Delegates, and Directors must
constitute a majority of committee membership. The Board of Directors may also appoint Advisory Committees. Task forces may include any Individual Member and do not require Director membership.

Chapter VI: Membership

A. General Qualifications—Member Dues.

Membership shall be open to individuals and entities that apply for membership, who are interested in and supportive of the purposes of the Association and that timely remit applicable dues as established by the House of Delegates, within the following categories of membership.


Except as may otherwise be provided by law, the Articles of Incorporation, or by these Bylaws, the number, qualifications, rights, privileges, dues, fees, responsibilities and the provisions governing the withdrawal, suspension and expulsion of members shall be determined by the Board of Directors. Any right of members to title or interest in or to the Association, its properties and franchises, shall cease and divest upon termination of membership, except that the liability of a member for sums due the Association shall survive such termination, unless otherwise expressly provided by the Board of Directors.

C. Institutional Membership

1. Classes, Qualifications and Obligations. Following are the classes, qualifications and obligations for Institutional Membership. Institutional Members do not have the right to vote but their representatives have the right to participate in and vote within the Council for which they qualify.

   a) Institutional Members:

   1. To qualify as an active Institutional Member, an entity shall be a dental school granting a D.D.S. or D.M.D. degree as a part of an accredited college or university in the United States or Canada and having begun instruction of its first class of dental students, residents or fellows is eligible to apply for Institutional Membership (Canadian dental schools have the option of selecting Institutional Membership or Affiliate Membership).

   2. Applications for Institutional Membership should be presented in writing at least 60 days before an ADEA Annual Session & Exhibition. Institutions are elected to membership by a majority affirmative vote of the House of Delegates and their memberships take effect the July 1 following House of Delegates approval.

   b) Provisional Members:

   1. To qualify as a Provisional Member, an entity shall be a developing dental school planning to grant a D.D.S. or D.M.D. degree as part of an accredited college or university in the United States or Canada is eligible to apply for Provisional Membership (Developing Canadian dental schools have the option of selecting Provisional or Affiliate Membership).

   2. Applications for Provisional Membership should be presented in writing at least 60 days before an ADEA Annual Session & Exhibition. Institutions are elected to membership by a majority affirmative vote of the House of Delegates and their memberships take effect the July 1 following House of Delegates approval.

   3. Provisional Members in good standing automatically become Institutional Members upon matriculation of the first class of students.
c) Affiliate Membership:
   1. The following types of institutions in the United States or Canada are eligible to apply for Affiliate Membership, provided that they are not eligible for Institutional or Provisional Membership and that their dental, advanced dental and/or allied dental education programs are approved by the Commission on Dental Accreditation. Each location or campus of an institution must have its own Institutional Membership.
      - Canadian dental schools approved by the Commission on Dental Accreditation of Canada.
      - Academic institutions—other than hospitals—conducting advanced dental education programs.
      - Hospitals that conduct advanced dental education programs and that are not under the same governance as an Institutional or Provisional Member institution. Hospital programs under the same governance as Institutional or Provisional Member institutions are included in the parent school’s Institutional or Provisional Membership.
      - The United States Air Force, Army, Navy, Public Health Service, Department of Veterans Affairs and comparable agencies of the Canadian government.
      - Institutions conducting dental hygiene, dental assisting and dental laboratory technology education programs, and:
         o Those programs conducted at the main teaching site of an Institutional or Provisional Member institution but are not under the administrative control of that Institutional or Provisional Member institution; and
         o Those programs under the administrative control of an Institutional or Provisional Member institution and are conducted away from the main teaching site of that Institutional or Provisional Member institution. Such programs must be Affiliate Members in order to belong to the Council of Allied Dental Program Directors.
      - Institutions conducting other dental or allied dental education programs recognized by the Board of Directors.
   2. Applications for Affiliate Membership can be submitted at any time for approval by the President and CEO. Memberships become effective on January 1, April 1, July 1 or October 1 (whichever date first follows approval).

d) Corporate Membership:
   1. To qualify as a Corporate Member, an entity shall be a company dealing with products and/or services beneficial to dental education and/or dentistry is eligible to apply for corporate membership, and they must not cite Corporate Membership for commercial purposes (e.g., to not imply ADEA endorsement of products and services).
   2. Applications to become a Corporate Member can be submitted at any time for approval by the Board of Directors at its next meeting. Memberships become effective on January 1, April 1, July 1 or October 1 (whichever date first follows approval). Corporate Memberships are reviewed annually.

2. **Forfeiture of Institutional Membership.** An Institutional Member forfeits his or her membership as follows:
a) Ceasing to meet the membership qualifications specified in Chapter VI, Section C of these Bylaws renders an Institutional Member subject to immediate forfeiture of membership as determined by the President and CEO.

b) Institutional or Provisional Member institutions in arrears in payment of their dues at an ADEA Annual Session & Exhibition forfeit their memberships.

c) Affiliate or Corporate Member institutions in arrears in payment of their dues more than six months beyond the dues payment date forfeit their memberships.

3. **Reinstatement of Institutional Membership after Payment of Dues in Arrears.**
   Institutional Memberships forfeited for nonpayment of dues may be reinstated upon payment and approval of the President and CEO.

D. **Individual Membership**

1. **Classes, Qualifications, and Obligations.** The classes, qualifications and obligations of Individual Membership are as follows:
   a) Individual Members:
      1. Any faculty member or other person appointed to or employed by a dental, advanced education, hospital and/or allied dental education ADEA member institution is eligible to become an Individual Member.
      2. An Individual Membership may be activated at any time during the year. They become effective as soon as the activation is processed and remain in effect for the following 12 months.

   b) Student Members:
      1. Any student, resident or fellow enrolled in a dental school, an advanced dental education program and/or an allied dental education program in an ADEA member institution is eligible for Student Membership.
      2. A Student Membership may be activated at any time during the year. It becomes effective as soon as the activation is processed and remains in effect for as long as the member is enrolled at an ADEA member institution.
      3. Ceasing to meet the Student Member qualifications specified in these Bylaws results in immediate forfeiture of Student Membership. However, the individual may then apply for Individual Membership.

   c) Retired Members:
      1. Any individual who has completely retired from dental education and dental practice and who has been an Individual Member is eligible to become a Retired Individual Member.
      2. A Retired Membership may be activated at any time during the year. Such memberships take effect as soon as the activation is processed and remain in effect for the following 12 months.

   d) Honorary Members:
      1. Any individual who has rendered a distinct service to humankind, made outstanding contributions to dentistry and/or rendered exceptional service to the Association may be nominated by the Board of Directors for Honorary Membership.
      2. Individuals become Honorary Members by being elected by the affirmative vote from a majority in the House of Delegates. Honorary Members are entitled to all the privileges of Individual Membership except the right to vote. An Honorary Membership is effective for the member’s lifetime.
e) Affinity Members:
   1. Any individual with a demonstrable interest in dental, allied dental or advanced
dental education who is not currently a faculty member, employee or student,
resident or fellow in an ADEA member institution is eligible for Affinity
Membership.
   2. Applications for Affinity Membership may be submitted at any time during the
year. Memberships become effective as soon as the application is processed and
remain in effect for the following 12 months.

E. Membership Voting Rights.

Members who are on a Council, except for Honorary Members who are non-voting, have
voting rights within respective Councils to elect Board Directors and the Administrative
Boards of their Councils as provided for in their specific Council procedures and provisions.
No class or category of member of the Association shall otherwise have any right to vote,
except as may be expressly required by statute or allowed by the Association’s Articles of
Incorporation or Bylaws.

Chapter VII: Councils

A. Functions and Rights of the Councils

1. The Councils represent institutions and programs in each of the Association’s member
categories, except that the Council of Sections represents the Association’s Sections,
and they have the following functions:
   a) To represent its constituency within the Association and at the member institutions;
   b) To recommend to the Board of Directors how the interests of the Council’s
constituency might be represented through the federal legislative and regulatory
processes;
   c) To exchange information among its members with other ADEA component groups
and among member institutions;
   d) To work with other ADEA component groups to encourage coordinated approaches
to dental health care delivery;
   e) To identify and provide consultation on projects, studies, and reports that will
benefit the membership;
   f) To introduce resolutions to the Board of Directors and/or House of Delegates; and
   g) To meet at the Annual Session & Exhibition.

2. Each Council is entitled to representation in the House of Delegates as set forth in
Chapter I, Section B above.

B. Leadership of the Councils—The Administrative Boards

1. Council Leadership Positions and Duties. Each Council has an Administrative Board
consisting of a Chair, Chair-elect (Vice-Chair for the Council of Students, Residents and
Fellows), Secretary, Member-at-Large and Board Director (ex officio).
   a) It is the duty of Chairs:
      1. To provide leadership in meeting Council goals and objectives;
      2. To Chair Council meetings; and
      3. To plan programs for Council meetings.
   b) It is the duty of Chairs-Elect:
      1. To Chair Council meetings in the absence of the Chair;
      2. To perform any duties requested by the Chair; and
3. To serve as Chair of the Nominating Committee to select candidates for Council Office.

c) It is the duty of Secretaries:
1. To record the minutes of Council and Administrative Board meetings or to see that they are recorded;
2. To submit the minutes of Council Annual Session meetings to the ADEA Headquarters within 60 days after the Meeting; and
3. To perform any duties requested by the Chair.

d) It is the duty of Members-at-Large:
1. To perform any duties requested by the Chair.

e) It is the duty of Board Directors:
1. To serve as ex officio Council Officers and to serve as Association Officers;
2. To represent the Councils’ interests on the Board of Directors;
3. To serve as consultants from the Board of Directors to the Councils in conducting their business and meeting their objectives; and
4. To report Board of Directors’ actions to the Council.

2. Qualifications. A person must be an Individual Member of the Association and a member of his or her Council to be eligible to serve on the Administrative Board, with the exception that a Board Director for Sections must have served as a past member or be a current member of the Council of Sections Administrative Board. To be eligible for nomination as Member-at-Large for Sections, an individual must also currently serve or have previously served as a Section Councilor or Section Chair.

3. Succession. Each year, the Member-at-Large succeeds to the position of Secretary, the Secretary to the position of Chair-elect and the Chair-elect to the position of Chair, except for the Council of Students, Residents and Fellows, whose positions are not automatically successive.

4. Nominations. Before each ADEA Annual Session & Exhibition, the Chair-elect and two Council members who are not on the Administrative Board nominate one or more individuals for the position of Member-at-Large (and Board Director if the incumbent Board Director will complete a term at the end of the ADEA Annual Session & Exhibition). For the Council of Students, Residents and Fellows, the Vice-Chair and two Council members who are not on the Administrative Board nominate one or more individuals for the position of Member-at-Large, Secretary, Vice-Chair, Chair and Board Director. Additional nominations may be made from the floor at the Council’s ADEA Annual Session & Exhibition meetings.

5. Election and Appointment. Administrative Board members are elected at the ADEA Annual Session & Exhibition. The method of voting is left to the discretion of the Council Chairs. For the Council of Students, Residents and Fellows, during the ADEA Annual Session & Exhibition, the four members of the new Administrative Board appoint a Council member to serve as a Member-at-Large. In the absence of a quorum at the ADEA Annual Session & Exhibition, an electronic ballot is issued within 30 days after the ADEA Annual Session & Exhibition.

6. Installation. All Administrative Board members, except Board Directors, are installed at Council meetings held during the ADEA Annual Session & Exhibition. Board Directors are installed at the ADEA Annual Session & Exhibition at the Closing of the House of Delegates. Administrative Board members who are elected by electronic ballot following the ADEA Annual Session & Exhibition are installed immediately.
7. **Terms.** All Council Administrative Board members, except Board Directors, serve only one, one-year terms. Board Directors serve three-year terms, except for the Board Director for Students, Residents and Fellows, who may serve up to three consecutive one-year terms if the individual qualifies for membership on the Council of Students, Residents and Fellows during that entire period. An individual who has served a full term as a Board Director (or three consecutive one-year terms as a Board Director for Students, Residents and Fellows), and Chair, Chair-elect, Secretary or Member-at-Large may not succeed himself or herself in any of those positions.

8. **Replacement.** An Administrative Board member who ceases to qualify for membership on a Council may continue in that particular position for the duration of his or her term on the Board. An Administrative Board member who completely ceases to be active in dental, advanced dental or allied dental education no longer qualifies and immediately loses his or her position on the Council. In the event of the death, resignation or removal of a Council member or a Board Director, then the Council Administrative Board shall appoint a non-Board member of the Council to serve in such position until the next meeting of the Council at the ADEA Annual Session & Exhibition, at which an election (in accordance with this Chapter VII, 3–8) shall be held to fill the remainder of the term of the office of the Board Director that became vacant by reason of such death, resignation or removal.

9. **Alternates.** Council Administrative Board members may not send alternates to attend Council Administrative Board meetings. Council members unable to attend a House of Delegates Meeting or a Council meeting, or who serve in the House of Delegates in two or more positions (e.g., as a member of the Council of Faculties and Council of Sections), may appoint alternates to represent them. Members of the Councils of Allied Dental Program Directors, Hospitals and Advanced Education Programs and Students, Residents and Fellows must appoint alternates who are members of their Council. Members of the Council of Sections must appoint the Chair-elect or Secretary of their Section. Members of the Councils of Deans and Faculties must appoint individuals from their institutions. Delegates representing two or more Councils in the House of Delegates must decide which Council they wish to represent and then appoint an alternate(s) for the other Council(s) according to the foregoing guidelines. All alternates must be ADEA Individual Members. Corporate Council Administrative Board members unable to attend a House of Delegates Meeting may appoint alternates to represent them; such alternates must be members of the Corporate Council. All Council alternates to the House of Delegates must be selected prior to the ADEA Annual Session & Exhibition and be ratified by the appropriate Council prior to the Opening of the House of Delegates.

C. **Meetings of the Councils**

1. **Meetings.** All Councils meet at the ADEA Annual Session & Exhibition and endeavor to meet in the fall season. Administrative Boards plan ADEA Annual Session & Exhibition programs and submit program details to the ADEA Headquarters for potential publication in the ADEA Annual Session & Exhibition Program. The schedule of Council programs is determined by the Board of Directors. Councils able to provide funding may hold additional conferences between the ADEA Annual Session & Exhibition meetings.
2. **Notice.**
   a) Any Administrative Board meeting may be called by the Chair or by a majority of the Administrative Board upon seven days’ notice. A majority of any Council’s Administrative Board constitutes a quorum for the transaction of business for their respective meeting.
   b) A Council meeting may be called by the Administrative Board or by 10% of the Council upon 30 days’ notice.

3. **Rules.** Additional rules for Councils are included in Chapter X (Rules for Councils, Sections and Special Interest Groups) of these Bylaws.

**D. The Councils of the Association—Membership and Quorum.**

The Councils of the Association, and their membership, are as follows. All Council members must be Individual Members of the Association.

1. **The Council of Allied Dental Program Directors** consists of the following categories of membership:
   a) Individual Members from an Institutional/Affiliate Member institution are eligible for Council membership, can be elected to a Council office, elected to Board Director of Council to serve on the Board of Directors, vote on Council issues, and can serve as Delegates in the House of Delegates. This includes the following:
      1. Director of a Commission on Dental Accreditation-approved Allied Dental Program or Dean, Department Chair; or
      2. Administrator that has oversight of a Commission on Dental Accreditation-approved Allied Dental Program.
   b) Individual Members from an Institutional/Affiliate Member institution are eligible for Council membership, can be elected to a Council office, can vote on Council issues and can serve as a Delegate in the House of Delegates; however, the following individuals are not part of a CODA-approved program and therefore cannot be elected to Board Director of Council to serve on the Board of Directors:
      1. Director of a non-Commission on Dental Accreditation-approved Allied Dental Program in an ADEA member institution; or
      2. Director of an Advanced Allied Dental Education Programs leading to a Master’s or Baccalaureate Degree in an Allied Dental Discipline.
   c) Individuals holding Affinity Membership are eligible for Council membership and may participate in selected ADEA meetings and committees; however, they cannot be elected to a Council office or Board Director of Council to serve on the Board of Directors. These individuals are not part of a member institution and are therefore ineligible to vote. This includes the following:
      1. Director of a Commission on Dental Accreditation-approved Allied Dental Program in non-member institutions;
      2. Director of a non-Commission on Dental Accreditation-approved Allied Dental Program;
      3. Director of an Advanced Allied Dental Education Programs leading to a Master’s or Baccalaureate Degree in an Allied Dental Discipline at institutions that are not ADEA institution members.

The Quorum requirement for the transaction of any Council business, including the election of Members-at-Large and Board Directors is one-fourth of the total membership of the Council.
2. **The Council of Deans** consists of the dean (or an alternate) of each Institutional and Provisional Member institution, the chief dental administrator (or an alternate) of each Affiliate Member institution conducting non-hospital-based advanced dental education programs, the chief dental Officer or administrator (or an alternate) of each Affiliate Member federal dental service and the President (or an alternate) of the Association of Canadian Faculties of Dentistry. In addition, the Council includes any members of its Administrative Board who are no longer in the above categories. The Quorum requirement for the transaction of any Council business, including the election of Members-at-Large and Board Directors, is a majority of the total membership of the Council.

3. **The Council of Faculties** consists of one faculty member (or an alternate) elected by the faculty of each Institutional and Provisional Member institution, in addition to any members of the Administrative Board who are no longer in the above category. Members are elected to three-year terms, and approximately one third of the members are replaced or reelected annually, according to a schedule maintained in the ADEA Headquarters. The methods of electing members, removing members and electing new members to fill unexpired terms are left to the discretion of individual member institutions. Each faculty electing or reelecting a member in a given year is required to notify the ADEA Headquarters of the name of its representative by January 1 preceding the ADEA Annual Session & Exhibition at which the incumbent faculty member's term ends. The Quorum requirement for the transaction of any Council business, including the election of Members-at-Large and Board Directors, is a majority of the total membership of the Council.

4. **The Council of Hospitals and Advanced Education Programs** includes faculty in Commission on Dental Accreditation-approved advanced dental education programs located in ADEA-member institutions, Residents and Fellows in Commission on Dental Accreditation-approved advanced dental education programs located in ADEA-member institutions and past members of the COHAEP Administrative Board who are appointed to or employed in an ADEA member institution. Eligibility to vote for election to the Council’s Administrative Board or for Board Director is limited to Program Directors and/or Chiefs of Service on Commission on Dental Accreditation-approved advanced dental education programs located in ADEA-member institutions. Only Program Directors and Chiefs of Service, or their designees, may vote during Council meetings on Council business. Each program receives one vote. Program Directors or Chiefs of Service in Commission on Dental Accreditation-approved advanced dental education programs located in ADEA member institutions are eligible for election to the Council’s Administrative Board or Board Director. The Quorum requirement for the transaction of any Council business, including the election of Members-at-Large and Board Directors, is one tenth of the total voting membership of the Council.

5. **The Council of Sections** includes the Council of Sections Administrative Board, Section Councilors and Chairs or their alternates and any former member of the Council’s Administrative Board. Alternates for the Councilors and Chairs may only be a current Section Chair-elect or Section Secretary. All Section Officers from each Section and Chairs of each Special Interest Group are eligible to participate in Council business meetings and may vote at those meetings. Section Councilors, Chairs and those who have previously served as a Section Councilor or Chair are eligible for election to the Administrative Board. The Council of Sections Section Councilor is elected by each Section to a three-year term. Councilors may be reelected to one additional three-year
term. The quorum requirement for the transaction of any Council business, including the election of Members-at-Large and Board Directors, is one third of the total voting membership of the Council.

6. The Council of Students, Residents and Fellows consists of students, residents and fellows representing any of the following types of programs conducted by each Active, Provisional and affiliate member institution: (a) students, residents and fellows in a program leading to the D.D.S. or D.M.D. degree; (b) students, residents and fellows enrolled in advanced dental education programs; (c) students, residents and fellows in dental hygiene education programs; (d) students, residents and fellows in dental assisting education programs and (e) students, residents and fellows in dental laboratory technology education programs. The methods of electing members, removing members and electing new members to fill unexpired terms are left to the discretion of individual member institutions. The quorum requirement for the transaction of any Council business, including the election of Members-at-Large and Board Directors, is a majority of those members who attend a meeting at which an election occurs.

7. The Corporate Council consists of the official representative of each Corporate Member. The Corporate Council has five positions: Chair, Chair-elect, Secretary, Member-at-Large and Board Director (ex officio). An individual must be a member of the Corporate Council to be eligible for a Corporate Council position. An individual may not hold two or more Corporate Council offices simultaneously. The quorum requirement for the transaction of any Council business, including the election of Members-at-Large and Board Directors, is a majority of the total membership of the Council.

Chapter VIII: Sections

A. Functions.

A Section is a programmatic group that provides an opportunity for its members to exchange information on the Section’s specific academic and administrative interests.

1. Academic and administrative Sections are periodically asked by the House of Delegates, Board of Directors, Chair of the Board and President and CEO to undertake assignments and to comment on appropriate materials.

2. A Section is further encouraged to initiate projects and studies of benefit to the Association and its members.

3. A Section may submit resolutions to the House of Delegates.

B. Membership in a Section.

Each Section consists of any Individual, Student, Affinity Member, Retired and Honorary ADEA member interested in the Section’s particular academic or administrative area. An ADEA member may join any number of Sections, participate in the Section’s business affairs, vote and attend any meeting of a Section to which he or she belongs. To hold office, the ADEA member must also be a member of the Section.

C. Formation of a Section

1. To form a new Section, a group must have begun as a special interest group (SIG; see Chapter IX, Section C: Formation of a New SIG). When Section status is desired, the SIG must:
   a) Notify the Chair of the Council of Sections Administrative Board and Council of Sections Staff Liaison of the intent to propose a new Section.
2. The Council of Sections Administrative Board considers each proposal to form a new Section at its interim fall meeting.
   a) If the proposal is approved, the Council of Sections Administrative Board forwards the recommendation to the Board of Directors for consideration at its subsequent meeting.
   b) If the recommendation is approved by the Board of Directors, the Board of Directors forwards a resolution to form the new Section to the House of Delegates for hearing at the subsequent Annual Session & Exhibition.
   c) Only the House of Delegates has the authority to approve a resolution proposing a new Section. Upon approval by the House of Delegates, a new Section begins operation immediately. If the proposal is not approved, the SIG may resubmit its request in a subsequent year.

3. The Council of Sections Administrative Board reviews each Section annually. A review of performance is based on criteria established by the Council of Sections Administrative Board:
   a) The Administrative Board may impose corrective actions, including probation, for those Sections that fail to submit annual reports or perform prescribed functions.
   b) The Council of Sections Administrative Board may recommend that a Section be disbanded or suggest that two or more Sections be merged into one Section based on strong similarities.
      1. The Council of Sections Administrative Board forwards a recommendation that a Section be disbanded or merged to the Board of Directors.
      2. If the recommendation is approved by the Board of Directors, the Board of Directors forwards an appropriately worded resolution to the House of Delegates for hearing at the subsequent ADEA Annual Session & Exhibition.
      3. Only the House of Delegates has the authority to disband a Section or merge Sections.

4. Each Section has a Councilor, who serves a three-year term of office, and a Chair, Chair-elect and Secretary, who serve one-year terms in each office in succession.
   a) **Qualifications and Duties:** A person must be a member of the Association and a member of the Section to be eligible for office in that Section. In the instance of Councilor, the person must first have served through the Officer positions, including the Chair, to be eligible for election to the Councilor position.
      1. It is the duty of the **Councilor** to provide continuity of leadership for the Section and mentoring of new Section Officers; attend the ADEA Annual Session & Exhibition and interim meetings of the Council of Sections; serve as a Delegate in the House of Delegates during the ADEA Annual Session & Exhibition; assist in planning, implementing, and assessing Section programs and projects; prepare and submit the Section annual report after each ADEA Annual Session & Exhibition to the Council of Sections Staff Liaison; and serve as Section liaison with the Council of Sections Administrative Board.
      2. It is the duty of the **Chair** to provide leadership in the coordination of Section activities; attend the ADEA Annual Session & Exhibition and interim fall meetings of the Council of Sections; chair Section meetings; assist in planning programs
for Section meetings; and serve as a Delegate in the House of Delegates during the ADEA Annual Session & Exhibition.

3. It is the duty of the Chair-elect to serve as Chair in the absence of the Chair; attend the ADEA Annual Session & Exhibition and fall meetings of the Council of Sections; perform any Section-related duties requested by the Chair; serve as Chair of the Nominating Committee to select candidates for Section office; and serve as the Program Chair for the Section and be responsible for submitting program proposals on behalf of the Section.

4. It is the duty of the Secretary to record the minutes of Section meetings and disseminate them to the Section membership; attend the ADEA Annual Session & Exhibition and interim fall meetings of the Council of Sections; submit the minutes and current Officer contact information to the Section Councilor for submission with the Section annual report to the Council of Sections Staff Liaison; publish and disseminate a Section newsletter; and perform any Section-related duties requested by the Chair.

b) Succession: Each year the Secretary succeeds to the office of Chair-elect, and the Chair-elect succeeds to the office of Chair. There is no automatic succession to the office of Councilor.

c) Nominations: Before each ADEA Annual Session & Exhibition, the Nominating Committee (Chair-elect and two Section members who are not Officers) nominates one or more individuals for the office of Secretary. Every third year, the Committee nominates one or more individuals for the office of Councilor. Additional nominations for these offices may be made from the floor at the Section business meeting during the ADEA Annual Session & Exhibition.

d) Election: Section Officers are elected at the Section Members’ Forum held at the ADEA Annual Session & Exhibition. The method of voting is left to the discretion of the Chair.

e) Installation: All Section Officers take office after the conclusion of the Closing of the House of Delegates at the ADEA Annual Session & Exhibition.

f) Consecutive and Simultaneous Terms of Office: A Section Councilor may serve two consecutive three-year terms. A person may not hold more than one Section Officer position simultaneously or hold office in more than one Section simultaneously.

g) Replacement of Vacancy: If the position of Chair, Chair-elect or Secretary becomes vacant, the remaining Section Officers appoint another member of the Section to serve out the unexpired term. If the Councilor is unable to serve for any reason, a new Councilor will be elected by mail or electronic ballot by the Section members to serve out the unexpired term.

Chapter IX: Special Interest Groups (SIGs)

A. Functions.

A Special Interest Group (SIG) provides an opportunity for its members to exchange information and work together on specific academic or administrative interests in dental, allied dental and advanced dental education not otherwise routinely addressed by an established Section. The structure of a SIG provides an opportunity and provides a means for a group of ADEA members to focus on areas of common interest.
1. A SIG may be assigned tasks by the Board of Directors, House of Delegates, or the Council of Sections Administrative Board on related studies of benefit to the Association and its members.

2. Each SIG Chair may be an active voting member of the Council of Sections at Council business meetings.

B. Participation and Membership in a SIG.

A SIG consists of any Individual, Student, Affinity Member, Retired and Honorary ADEA member interested in the SIG’s particular academic or administrative area. An ADEA member may join any number of SIGs and attend any meetings of a SIG to which he or she belongs.

C. Formation of a New SIG

1. To form a new SIG, an individual or group must:
   a) Notify the Chair of the Council of Sections Administrative Board and the Council of Sections Staff Liaison of the intent to propose a new SIG.
   b) Prepare a proposal to support the case following criteria established by the Council of Sections Administrative Board.
   c) Submit the completed proposal to the Chair of the Council of Sections Administrative Board no later than the designated deadline date.

2. The Council of Sections Administrative Board considers each submitted proposal:
   a) If the proposal is approved, the Council of Sections Administrative Board forwards its recommendation to the Board of Directors for consideration at its subsequent January meeting.
   b) If the proposal is approved by the Board of Directors, the SIG begins operation immediately upon notification by the Chair of the Council of Sections Administrative Board.

D. Review.

Each year, the Council of Sections Administrative Board reviews each SIG and its performance based on criteria established by the Council of Sections Administrative Board.

1. The Administrative Board may impose corrective actions, including probation, for a SIG that fails to submit an annual report or perform prescribed functions.

2. The Council of Sections Administrative Board may disband a SIG.

E. Officer and Term of Office.

Each SIG must have a Chair, who serves a one-year term. A Chair may serve three consecutive one-year terms if reelected by the members. The SIG may voluntarily form a leadership organizational structure similar to that of a Section (Chair, Chair-elect and Secretary) for managing the business of the group. The SIG Chair is the only Officer who can vote in the Council of Section’s business meetings.

1. Qualifications. A person must be a member of the Association and a member of the SIG to be eligible for office in that SIG.
2. **Duties.**
   a) The duties of the Chair are to: provide leadership in the coordination of SIG activities, attend the ADEA Annual Session & Exhibition and interim fall meetings of the Council of Sections, Chair SIG meetings, plan programs for SIG meetings, record the minutes of SIG meetings and disseminate them to the SIG membership and submit the SIG annual report and business meeting minutes.
   b) If a SIG chooses to have a leadership organizational structure similar to that of a Section, see Chapter VIII, Section C, 4 for Officer duties.

3. **Succession.** If a SIG chooses to have a leadership organizational structure similar to that of a Section (i.e., Chair, Chair-elect and Secretary), the Secretary succeeds to the Office of Chair-elect, and the Chair-elect succeeds to the Office of Chair.

4. **Nominations, Elections, Terms and Installation.** If a SIG has a leadership organizational structure similar to that of a Section, before each ADEA Annual Session & Exhibition, the Nominating Committee (Chair-elect and two SIG members who are not Officers) nominates one or more individuals for the office of Secretary. Each year, a Chair is elected to serve a one-year term. Chairs may serve a maximum of three one-year terms. SIG Officers are elected at the SIG business meeting held at the ADEA Annual Session & Exhibition. A SIG Officer takes office at the conclusion of the ADEA Annual Session & Exhibition. A person may not hold office in more than one SIG simultaneously. SIG Chairs are not eligible to serve as an alternate in the House of Delegates.

5. **Replacement of Vacancy.**
   a) If the position of Chair becomes vacant, the SIG members must nominate and elect another member of the SIG to serve out the unexpired term by mail or electronic ballot.
   b) If a SIG chooses to have a leadership organizational structure similar to that of a Section (i.e., Chair, Chair-elect and Secretary), the remaining Officers will appoint a SIG member to serve out the unexpired term of the Officer whose position has become vacant.

F. **Establishing a Section from a Special Interest Group**

1. A SIG is eligible to apply for Section status after a minimum of two years of viable leadership and sustainable membership. If the SIG chooses to apply for Section status, it must:
   a) Prepare a proposal to support the case following criteria established by the Council of Sections Administrative Board located in the ADEA Governance Policy and Procedures Manual.
   b) Submit the completed proposal to the Chair of the Council of Sections Administrative Board and the ADEA Staff Liaison to the Council of Sections no later than the designated deadline date.

2. The Council of Sections Administrative Board considers each proposal that has been submitted.
   a) If the proposal is approved, the Council of Sections Administrative Board forwards the recommendation to the Board of Directors for consideration at its subsequent meeting.
   b) If the recommendation is approved by the Board of Directors, the Board of Directors forwards a resolution to form the new Section to the House of Delegates for hearing at the subsequent ADEA Annual Session & Exhibition.
c. Only the House of Delegates has the authority to approve a resolution proposing establishing a SIG as a Section. Upon approval by the House of Delegates, the new Section begins operation immediately. If the proposal is not approved, the SIG may resubmit its request in a subsequent year.

Chapter X: Rules for Councils, Sections, and SIGs

The above groups, Councils, Sections and SIGs are hereinafter referred to in this chapter as “component groups” or “groups.”

A. Finances.

Records and accounts are maintained at the ADEA Headquarters. Any special allocation or residual amount, which is determined by the Board of Directors and House of Delegates, is available for a group’s annual expenditures. The allocated or residual funds may be used by a group for any reasonable expenditure as outlined in the Board of Directors approved policies for such expenses. Reimbursements for approved expenses shall be processed according to Association policy. All group requests for funding from outside organizations must receive prior Board of Directors’ approval and be coordinated by the ADEA Headquarters.

B. Employment.

Component groups may not employ an individual except on authorization of the Board of Directors.

C. Contracts.

Component groups may not execute a contract that in any way involves the Association, except on authorization of the Board of Directors.

D. Establishment of Policy.

Component groups have the privilege of recommending Association policy. However, they are not authorized to initiate or implement a new policy or to alter or extend an existing policy without prior review and approval by the House of Delegates.

E. Public Statements.

The President and CEO shall serve as the principal spokesperson for the Association along with the Chair of the Board of Directors in dealing with the profession and the public. No one except the President and CEO or someone authorized by the Board of Directors is allowed to issue a public statement on behalf of the Association or any subgroup within the Association.

F. Communication.

Communications dealing with major component group activities or policy should be sent to all group members by the Chair or another Officer. No one except the President and CEO or someone authorized by the Board of Directors is allowed to issue a public statement on behalf of the Association or any subgroup within the Association.
G. Relations with Other Organizations and Agencies.

No component group is authorized to appoint an official representative to another organization unless authorized to do so by the Board of Directors. No one except the President and CEO or someone authorized by the Board of Directors is allowed to issue a public statement on behalf of the Association or any subgroup within the Association.

H. Relations with Other Component Groups.

Component group Chairs should refer to the President and CEO all matters that properly are the concern of another component group. Requests for information or assistance from another component group should be channeled through the President and CEO’s office.

I. Additional Rules for Component Groups.

Component groups may prepare additional rules needed to conduct their affairs, provided that those rules are consistent with the Association’s Bylaws. Such additional rules should be transmitted to the President and CEO for his or her records.

J. Mail Ballots.

Component groups are authorized to transact business by mail ballot. Mail ballots may be sent and returned by electronically or via postal mail. The results of mail ballots are as binding as those obtained at official meetings. The following regulations apply to all mail ballots:

1. Mail ballots should be initiated by an Officer or appropriate staff member.
2. Each mail ballot should include enough information to allow recipients to register an opinion on the issue in question.
3. A majority vote of the ballots cast is required for approval; and
4. Ballots not returned within 30 days will not be counted.

Chapter XI: President and CEO

A. Function and Duties.

The President and CEO is the Association’s Chief Administrative Officer appointed under contract by the Board of Directors. That contract establishes the tenure of office and salary, and more fully sets forth the duties, which include the following. The President and CEO is expected and empowered to:

1. Serve as the principal spokesperson for the Association, along with the Chair of the Board of Directors, in dealing with the profession and the public;
2. Serve as the chief administrator of the ADEA Headquarters and all of its branches;
3. Provide for the maintenance of the ADEA Headquarters and all property and offices owned or operated by the Association;
4. Employ and evaluate all members of the Association’s staff;
5. Coordinate the activities of all committees, Councils, Administrative Boards and other Association component groups;

6. Approve applications for Affiliate Membership;

7. Serve as the custodian of all monies, securities and deeds belonging to the Association;

8. Prepare financial reports for the Board of Directors;

9. Disburse the Association’s funds at the direction of the Board of Directors, provided those disbursements are consistent with the annual budget approved by the House of Delegates;

10. Cause all employees entrusted with Association funds to be bonded by a surety company and to determine the amount of the bond;

11. Supervise the publication and distribution of all Association publications;

12. Determine the time and location of the ADEA Annual Session and Exhibition;

13. Notify Individual and Institutional Members of annual and special Meetings of the House of Delegates;

14. Provide a program for the ADEA Annual Session & Exhibition;

15. Present an annual report of the activities of the ADEA Headquarters;

16. Publish an Annual Proceedings of the Association;

17. Perform such other duties as may be determined by the Board of Directors and the Chair of the Board.

B. Appointment.

The President and CEO is appointed by the Board of Directors.

C. Tenure of Office and Salary.

The Board of Directors determines the tenure of office and salary of the President and CEO. No one term may exceed five years.

Chapter XII: Official Publication, Editor, Tenure of Office and Remuneration

A. Official Publication

1. **Title.** The Association publishes an official journal under the title of the *Journal of Dental Education*, hereinafter referred to as the “*Journal.*”

2. **Objective.** The objective of the *Journal* is to report, chronicle and evaluate scientific and professional developments and Association activities of interest to dental and allied dental educators.
3. **Frequency of Issue and Subscription Rate.** The frequency of issue and the subscription rate of the *Journal* are determined by the Board of Directors on recommendations of the Editor and the Editorial Review Board.

4. **Editor.** The Association’s Editor is the Editor of the *Journal*.

**B. Editor.**

The Association’s Editor is appointed by the Board of Directors. The duties of the Editor are to consult with the Board of Directors in the selection of the Editorial Review Board; exercise, with the Editorial Review Board, editorial control over the *Journal*, subject to the policies and procedures established by the Board of Directors and these Bylaws; and perform such other duties as may be determined by the Board of Directors.

**C. Tenure of Office and Remuneration.**

The Board of Directors determines the tenure of office and remuneration for the Editor. No one term may exceed five years; however, the Editor may be appointed for more than one term.

**Chapter XIII: Representatives to Other Organizations**

**A. Nominees for Appointment to the Commission on Dental Accreditation and the Joint Commission on National Dental Examinations.**

The Board of Directors will recommend a person for appointment by the House of Delegates for each vacancy occurring in the following positions:

1. The Commission on Dental Accreditation, and

2. The Joint Commission on National Dental Examinations.

Additional nominations may be made from the floor at the Opening of the House of Delegates. If there are additional nominations, the election procedures are the same as those provided in Chapter I of these Bylaws. If there are no additional nominations, nominees are declared elected at the Opening of the House of Delegates.

**B. Representatives to Other Organizations.**

Representatives to other organizations are appointed by the Board of Directors, which also determines the organizations to which the Association appoints such representatives.

**Chapter XIV: Conflicts of Interest**

**A. Representing the Association.**

Individuals who serve in the House of Delegates as Officers, or who are appointed or elected to represent the Association in its relations with other private organizations or government agencies; who serve as Council, Section and/or SIG Officers; who serve in an advisory or consultative role for the Association individually or through group or committee assignments; or who are otherwise involved in Association policy and administrative matters do so in a representative or fiduciary capacity and, at all times while serving in such positions, shall further the interests of the Association as a whole. Those Association leaders are:
1. Expected to avoid placing themselves in a position where personal or professional interests may conflict with their duty to the Association;

2. Prohibited to use information learned through their position for personal gain or advantage;

3. Prohibited to obtain for a third party an improper gain or advantage at the expense of the Association;

4. Obligated to disclose to the President and CEO any situation that might be construed as placing the individual in a position of having an interest that may conflict with his or her duty to the Association;

5. Presumed to have a conflict of interest if they, their family, employers or business associates have an interest that could be an impediment to the loyalty of the Association leader to the Association, with the determination about whether there is a conflict to be resolved by a majority vote of the Board of Directors;

6. Expected to avoid even the appearance of impropriety while serving the Association;

7. Shall, in the event of an actual or apparent conflict of interest, disclose all the material facts as to the relationship or interest, shall retire from the room, shall not participate in the deliberation and shall not vote on the matter, which shall enable the remaining Association leaders to make a good faith determination about the proposed transaction or matter, including whether it is fair to the Association. Such a good faith determination about the fairness of the proposed transaction or matter may be made post facto, by a ratification vote.

B. Record.

All actions taken pursuant to any conflict of interest shall are be noted in the meeting minutes. As is necessary to maintain a quorum, Association leaders who have the conflict of interest may be counted in determining the minimum number of decision-makers for such a matter.

Chapter XV: Indemnification and Limitation of Liability

Unless expressly prohibited by law, any person made, or threatened to be made, a party to an action, suit or proceeding (whether civil, criminal, administrative or investigative) by reason of the fact that such person, or such person’s testator or intestate, is or was a person who served or is serving the Association as a Director, Officer, committee member, volunteer, partner, trustee, employee or agent of another entity (i.e., an “Eligible Person”) by reason of that Eligible Person’s position with or service to the Association:

A. Shall be indemnified to the extent the Eligible Person was successful, on the merits or otherwise, in the defense of any such proceeding; and,

B. May be indemnified if the person acted in good faith and reasonably believed in the case of conduct in an official capacity, that the conduct was in the best interests of the Association; and in all other cases, that her or his conduct was at least not opposed to the best interests of the Association; and in the case of any criminal proceeding, had no reasonable cause to believe his or her conduct was unlawful;
C. But shall not be indemnified:

1. In connection with the proceeding by or in the right of the Association (unless it is determined that the person met the relevant standard of conduct under subsection B above), or

2. In connection with any proceeding with respect to conduct for which the person was adjudged liable on the basis that the person received a financial benefit to which she or her was not entitled, whether or not involving action in an official capacity; and,

D. With regard to any indemnification, shall be done only after complying with the provisions in the D.C. Nonprofit Corporation Act with regard to the procedures for making determinations about indemnification and the advance of expenses; and,

E. With regard to any Director or Officer, the indemnification provided by this Article shall not be deemed exclusive of any rights to which any such Director or Officer may be entitled under any statute, bylaw, agreement, vote of the Governing Body or otherwise, and shall not restrict the power of the Association to make any indemnification permitted by law; and provided further that

F. The Association may in its judgment advance expenses for indemnification to such persons to the fullest extent allowed by law.

Chapter XVI: Parliamentary Authority

In all matters not covered by its Bylaws, this organization shall be governed by the most current edition of the American Institute of Parliamentarians Standard Code of Parliamentary Procedure.

Chapter XVII: Amendments

A. Procedure to Amend the Bylaws.

These Bylaws may be amended at a meeting of the House of Delegates being held in association with an ADEA Annual Session & Exhibition by a two-thirds vote of the House of Delegates, provided the proposed amendment is presented in writing to the House of Delegates prior to or during the meeting.

B. Procedure to Amend the Articles of Incorporation.

The Articles of Incorporation of the Association may be amended at a meeting of the House of Delegates being held in association with an ADEA Annual Session & Exhibition by a two-thirds vote of the Delegates, provided the proposed amendment is presented in writing to the House of Delegates.

Chapter XVIII: Additional Provisions and Association Rules

A. Fiscal Year.

The Association’s fiscal year runs from July 1 through June 30.

B. Corporate Seal.

The official seal of the Association shall have inscribed thereon the name of the Association and shall be in such form and contain such other words and/or figures as the Board of
Directors shall determine. The official seal may be used by printing, engraving, lithographing, stamping or otherwise making, placing or affixing or causing to be printed, engraved, stamped or otherwise made, placed or affixed upon any paper or document, by any process whatsoever, an impression, facsimile or other reproduction of said official seal.

C. Advisory Boards.

The House of Delegates or Board of Directors may establish one or more Advisory Boards, without governing power or authority, to serve as a resource to them by providing advice, assistance, expertise and support for the advancement and promotion of the mission of the Association. They may appoint a Chair of any such Advisory Board who may be authorized to serve as an ex officio, non-voting member of either the House of Delegates or Board of Directors, as the case may be.
IGNITING MINDS UNLOCKING POTENTIAL

2015 ADEA ANNUAL SESSION & EXHIBITION
MARCH 7-10, BOSTON, MA

Celebrate all dental educators and administrators who are Igniting Minds and Unlocking Potential of every student at the 2015 ADEA Annual Session & Exhibition. Dental educators are critical to students’ success because of the knowledge and expertise they share with students. Faculty help instill in students a passion for dentistry and a sense of caring for patients. Each student is prepared for a professional life in dentistry because of the dental educators who guide and support them as they strive to meet their goals.

Each student brings to their dental education a unique set of life experiences and educational background. Join your colleagues at the 2015 ADEA Annual Session & Exhibition as we explore how dental educators ignite the minds and unlock the potential in each student, guiding them and preparing them for a rewarding career in the caring profession of dentistry.

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