2023 ADEA
House of Delegates Manual
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Schedule of the 2023 ADEA House of Delegates

Opening Session of the ADEA House of Delegates
Saturday, March 11, 2023, 4:30 to 5:30 p.m.

Voting for Chair-elect of the ADEA Board of Directors
Ballots may be cast on Sunday, March 12 and Monday, March 13 at the ADEA House of Delegates Booth in the registration area only. Voter registration cards must be surrendered to receive a ballot.

Voting hours are:
- Sunday, March 12 – 8:00 a.m. to 4:00 p.m.
- Monday, March 13 – 8:00 a.m. to noon.

ADEA Reference Committee Hearings

The Reference Committee on Association Policy Hearing will be held on Sunday, March 12 from 2:00 to 3:00 p.m.

The ADEA Reference Committee on Administrative Affairs Hearing will be held on Sunday, March 12 from 4:30 to 5:30 p.m.

For the names of the members of the Reference Committees and the resolutions assigned to them, please see page 19.

Closing Session of the ADEA House of Delegates
Tuesday, March 14, 3:30 – 4:30 p.m.

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 21.
Members of the 2023 ADEA House of Delegates

ADEA Board of Directors
Dr. Nader Nadershahi, Chair of the ADEA Board of Directors, University of the Pacific
Dr. Ana N. López-Fuentes, Chair-elect of the ADEA Board of Directors, University of Puerto Rico
Dr. Keith A. Mays, Immediate Past Chair of the ADEA Board of Directors, University of Minnesota
Dr. Heather Conrad, Board Director for Advanced Education Programs, The Ohio State University
Dr. Laura Romito, Board Director for Sections, Indiana University
Prof. Amy Coplen, Board Director for Allied Dental Program Directors, Pacific University
Dr. Mert Aksu, Board Director for Deans, University of Detroit Mercy
Dr. Manavi Nagai, Board Director for Students, Residents and Fellows, University of Southern California
Mr. Lawrence Schnuck, Board Director for Corporate Council, Kahler Slater
Dr. Michael Larry Bates, Board Director for Faculties, Louisiana State University Health New Orleans
Dr. Karen P. West, President and CEO, American Dental Education Association

ADEA Council of Advanced Education Programs
Administrative Board
Chair, Dr. Adam Lloyd, Meharry Medical College
Chair-elect, Dr. Thikriat Al-Jewair, University at Buffalo
Secretary, Dr. Susan Paurazas, University of Detroit Mercy
Member-at-large, Dr. Sherman August House, Meharry Medical College

Additional Delegates
Dr. Michael A. Cuddy, University of Pittsburgh
Dr. Jeffery Hicks, UT Health San Antonio
Dr. Mohammed N Islam, University of Florida
Dr. Philip Kang, Columbia University
Dr. Edmund Khoo, Indiana University
Dr. Roopali Kulkarni, University of Pennsylvania
Dr. Wei-Shao Lin, Indiana University
Dr. Alton G McWhorter, Texas A&M University
Dr. Kimberly Patterson, Stony Brook University
Dr. Roberta Pileggi, University of Florida
Dr. Sonali Rathore, Medical University of South Carolina
Dr. Gwendolyn Reeve, Weill Cornell Medicine
Dr. Peggy Timothe, Texas A&M University
Dr. Luis Yepes, UT Health San Antonio

ADEA Council of Allied Dental Program Directors
Administrative Board
Chair, Prof. Monica Hospenthal, Pierce College
Chair-elect, Prof. Marion Manski, Virginia Commonwealth University School of Dentistry
Secretary, Prof. Ann Bruhn, Old Dominion University
Member-at-Large, Dr. Carrie Hanson, Johnson County Community College
Dental Assisting
Prof. Misty Mesimer, Germanna Community College
Prof. Cara Miyasaki, Foothill College
Dr. Hema Udupa, Metropolitan Community College - Penn Valley Health Science Institute

Dental Hygiene
Prof. Jessica N. August, Portland Community College
Dr. Colleen Brickle, Normandale Community College
Dr. Wanda Cloet, Central Community College
Dr. Risa Handman, Georgia State University Perimeter College
Prof. Paula Hendrix, Oregon Institute of Technology
Dr. Joyce Hudson, Ivy Tech Community College - Anderson Campus
Dr. Michelle Hurlburt, West Coast University
Dr. Susan H. Kass, Miami Dade College
Prof. Rachel Kearney, The Ohio State University
Dr. Vickie Kimbrough, Taft College
Prof. Cara Miyasaki, Foothill College
Prof. Lisa Moravec, University of Nebraska Medical Center
Prof. Joanne Marie Pacheco, Fresno City College
Dr. Lynn Russell, University of Tennessee Health Science Center
Dr. Dianne Smallidge, MCPHS University
Prof. Lorie Speer, Eastern Washington University

ADEA Council of Deans

Administrative Board
Chair, Dr. Clark Stanford, The University of Iowa
Chair-elect, Dr. Janet M. Guthmiller, University of North Carolina at Chapel Hill
Secretary, Dr. Cherae Farmer-Dixon, Meharry Medical College
Member-at-large, Dr. Richard Black, Texas Tech University Health Sciences Center El Paso

Additional Delegates, U.S. Dental Schools
Dr. Elizabeth Andrews, Western University of Health Sciences
Dr. Noel Aymat, Ponce Health Sciences University
Dr. Charles N. Bertolami, New York University
Dr. T. Gerard Bradley, University of Louisville
Dr. Sheri Brownstein, Midwestern University-Arizona
Dr. Greg Chadwick, East Carolina University
Dr. Kenneth Chance, Sr., Case Western Reserve University
Dr. Lyndon Cooper, Virginia Commonwealth University
Dr. Saulius Drukteinis, Southern Illinois University
Dr. Cecile Feldman, Rutgers, The State University of New Jersey
Dr. A. Isabel Garcia, University of Florida
Dr. Lily T. Garcia, Texas A&M University
Dr. William Giannobile, Harvard University
Dr. Steven Haas, University of Missouri - Kansas City
Dr. Harold John Haering, Jr., Midwestern University-Illinois
Dr. Robert Handysides, Loma Linda University
Dr. Jan C.C. Hu, University of Michigan
Dr. Sarandeep Huja, Medical University of South Carolina
Dr. Wyatt Hume, University of Utah
Dr. Amid Ismail, Temple University
Dr. Andrea Jackson, Howard University
Dr. Steven Kaltman, Nova Southeastern University
Dr. Nadeem Karimbux, Tufts University
Dr. Denise Kassebaum, University of Colorado
Dr. Kevin Keating, California Northstate University
Dr. Nicole Kimmes, University of New England
Dr. Sreenivas Koka, University of Mississippi
Dr. Paul H. Krebsbach, University of California, Los Angeles
Dr. Cataldo Leone, Boston University
Dr. Steven Mark Lepowsky, University of Connecticut
Dr. Frank W. Licari, Roseman University of Health Sciences
Dr. Patrick Lloyd, Stony Brook University
Dr. William Lobb, Marquette University
Dr. Peter Loomer, UT Health San Antonio
Dr. James Mah, University of Nevada, Las Vegas
Dr. Angelo John Mariotti, Louisiana State University Health New Orleans
Dr. Jose Matos-Perez, University of Puerto Rico
Dr. Dwight McLeod, A.T. Still University-Missouri
Dr. Paul M. Mullasseril, University of Oklahoma
Dr. Carol Anne Murdoch-Kinch, Indiana University
Dr. Ronnie Myers, New York Medical College
Dr. Linda Niessen, Kansas City University
Dr. Marnie Oakley, University of Pittsburgh
Dr. Jeffrey Okeson, University of Kentucky
Dr. Stephen Pachuta, West Virginia University
Dr. James Ragain, Jr., University of Tennessee Health Science Center
Dr. Michael S. Reddy, University of California, San Francisco
Dr. Mark A. Reynolds, University of Maryland
Dr. Andre Ritter, University of Washington
Dr. Susan Rowan, University of Illinois Chicago
Dr. Stefan Ruhl, University at Buffalo
Dr. Avishai Sadan, University of Southern California
Dr. Ronald Sakaguchi, Oregon Health & Science University
Dr. Christian Stohler, Columbia University
Dr. Russell Taichman, University of Alabama at Birmingham
Dr. Denise Lynn Terese-Koch, Lincoln Memorial University
Dr. Robert Trombly, A.T. Still University-Arizona
Dr. Carroll Ann Trotman, The Ohio State University
Dr. John Valenza, UTHealth Houston
Dr. Jillian Wallen, Creighton University
Dr. Mark Wolff, University of Pennsylvania
Dr. Thomas Yoon, Lake Erie College of Osteopathic Medicine
Dr. Nancy Young, Augusta University
Dr. Rowen Kent Zetterman, University of Nebraska

Additional Delegates, Association of Canadian Faculties of Dentistry
Dr. Paul W. Major, University of Alberta

Additional Delegates, Federal Dental Service Programs
Dr. Drew W. Fallis, Uniformed Services University of the Health Sciences
Col. James Knowles, U.S. Air Force Dental Service
Col. David Tucker, U.S. Army Postgraduate Dental School
Dr. Steven Stokes, U.S. Naval Postgraduate Dental School
Additional Delegate, Nonhospital Based Advanced Dental Education Programs
Dr. Eli Eliav, Eastman Institute for Oral Health

ADEA Council of Faculties
Administrative Board
Chair, Dr. Eric Bernstein, University of Connecticut
Chair-Elect, Dr. Ahmad Maalhagh-Fard, University of Detroit Mercy
Secretary, Dr. Erin Gross, The Ohio State University
Member-at-large, Theodora Danciu, University of Michigan

Additional Delegates
Dr. William R. Bachand, Augusta University
Dr. Joyce A. Barbour, Meharry Medical College
Dr. Christine Keith, Creighton University
Dr. Mark T. Booth, University of the Pacific
Dr. Ana Carolina Botta-Maltese, Stony Brook University
Dr. Kai-Chiao Joe Chang, A.T. Still University-Arizona
Dr. Susan M. Chialastri, Temple University
Dr. Paula Collins, University of Louisville
Dr. Thanhphuong (Katie) Dinh, Lake Erie College of Osteopathic Medicine
Dr. Kimon Divaris, University of North Carolina at Chapel Hill
Dr. Evelyn Donate-Bartfield, Marquette University
Dr. Anuja Doshi, University of New England
Dr. David Scott Dunivan, A.T. Still University-Missouri
Dr. Rhonda J. Everett, Texas Tech University Health Sciences Center El Paso
Dr. Kim Fenesy, Rutgers, The State University of New Jersey
Dr. Ronald E. Forde, Loma Linda University
Dr. Nathalia Garcia, Southern Illinois University
Dr. Eric Gottman, University of Missouri - Kansas City
Dr. John Guarente, Boston University
Dr. Lea Hachem, UT Health San Antonio
Dr. Alexander Hall, Jr., New York Medical College
Dr. Lindsey Hamil, Medical University of South Carolina
Dr. Kevin L. Haney, University of Oklahoma
Dr. Marc Hayashi, University of California, Los Angeles
Dr. Zsuzsa Horvath, University of Pittsburgh
Dr. Jitendra Jethwani, Virginia Commonwealth University
Dr. Anita Joy-Thomas, UTHealth Houston
Dr. Alice Arroyo Julia, University of Puerto Rico
Dr. Shirley Y. Kang, Western University of Health Sciences
Dr. Anastasios Karydis, University of Tennessee Health Science Center
Dr. Roopali Kulkarni, University of Pennsylvania
Dr. Gabriela Lagreca, Tufts University
Dr. Jim Lai, University of Toronto
Dr. Mitchell Jay Lipp, New York University
Dr. Naty Lopez, University of Minnesota
Dr. James Lott, University of Mississippi Medical Center
Dr. Gary Lowder, University of Utah
Prof. Lisa Mallonee, Texas A&M University
Dr. Crystal McIntosh-Clarke, Howard University
Dr. Denise A. Mills, Midwestern University-Arizona
Dr. Aniruddh Narvekar, University of Illinois Chicago
Dr. Victor Oramas, Nova Southeastern University
Dr. Jennifer Perkins, University of California, San Francisco
Dr. Maureen Pezzementi, University of Alabama at Birmingham
Dr. Gitanjali Pinto-Sinai, University of Kentucky
Dr. Frank A. Roberts, University of Washington
Dr. Harlan Shiau, University of Maryland
Dr. Elizabeth V Simpson, Indiana University
Dr. Burke Soffe, Roseman University of Health Sciences
Dr. Jenny Son, University of Southern California
Dr. Ethelyn Thomason, University of Colorado
Dr. Tammy Thompson, University of Alabama at Birmingham
Dr. Kevin Eugene Van Kanegan, Midwestern University-Illinois
Dr. R. Todd Watkins, Jr., East Carolina University
Dr. Shayla Yoachim, University of Nebraska Medical Center

ADEA Council of Sections

Administrative Board
Chair, Dr. Elise Eisenberg, New York University
Chair-elect, Dr. Dharini van der Hoeven, University of Texas
Secretary, Dr. James Harrison, University of Louisville
Member at Large, Dr. Sheela Premaraj, Nova Southeastern University

Section on Academic Affairs
Chair, Dr. Tracy De Peralta, University of Colorado
Councilor, Dr. Emily Sabato, Rutgers, The State University of New Jersey

Section on Addiction Education
Chair, Dr. Vincent Chee, Loma Linda University
Councilor, Dr. Richard D’Innocenzo, Boston University

Section on ADEA PRIDE
Chair, Dr. Holly Sharp, University of Utah
Councilor, Dr. Herminio Perez, Rutgers, The State University of New Jersey

Section on Advanced and Graduate Education
Chair, Dr. Neeraj Panchal, University of Pennsylvania
Councilor, Dr. Joyce A. Barbour, Meharry Medical College

Section on Anatomical Sciences
Chair, Dr. Alison F. Doubleday, University of Illinois Chicago
Councilor, Dr. Duane R. Winden, Roseman University of Health Sciences - South Jordan, Utah

Section on Behavioral Sciences
Chair, Dr. Stuart M. Schrader, Indiana University
Councilor, Dr. Carly McKenzie, University of Alabama at Birmingham
Section on Biochemistry, Nutrition and Microbiology  
Chair, Dr. Claudia T. Freitas, Roseman University of Health Sciences - South Jordan, Utah  
Councilor, Dr. David Fischer, University of Detroit Mercy

Section on Business and Financial Administration  
Chair, Ms. Anne Rudwick, Oregon Health & Science University  
Councilor, Mr. Scott Arneson, The University of Iowa

Section on Cariology  
Chair, Dr. Susie Goolsby, Oregon Health & Science University  
Councilor, Dr. Marcelle Nascimento, University of Florida

Section on Clinic Administration  
Chair, Dr. Fields Farrior, University of New England  
Councilor, Ms. Sandra Phillips, University of Washington

Section on Clinical Simulation  
Chair, Dr. Shaista Rashid, A.T. Still University-Missouri  
Councilor, Dr. Kyriaki C. Marti, University of Michigan

Section on Community and Preventive Dentistry  
Chair, Dr. Tiffany Wilson, Meharry Medical College  
Councilor, Dr. Frank A. Roberts, University of Washington

Section on Comprehensive Care and General Dentistry  
Chair, Dr. Ahmed Sabbah, UT Health San Antonio  
Councilor, Elmer Newness, University of Detroit Mercy

Section on Continuing Education  
Chair, Dr. Jo Peterson, University of Minnesota  
Councilor, Ms. Martha Clements, Midwestern University-Arizona

Section on Dental Anatomy and Occlusion  
Chair, Dr. Amira Elgreatly, The University of Iowa

Section on Dental Assisting Education  
Chair, Prof. Cara Miyasaki, Foothill College  
Councilor, Dr. Janet Sell, Ozarks Technical Community College

Section on Dental Hygiene Education  
Chair, Prof. Michelle C. Arnett, University of Minnesota  
Councilor, Dr. Lorie Holt, University of Missouri - Kansas City

Section on Dental Informatics  
Chair, Dr. Sharon Perelman, Columbia University

Section on Dental School Admissions Officers  
Chair, Dr. David Koenecke, A.T. Still University-Missouri  
Councilor, Mr. Richard Bigham, University of Missouri - Kansas City
Section on Development, Alumni Affairs and Public Relations  
Chair, Mr. Doug Day, University of Washington  
Councilor, Mr. Randall Newquist, University of Washington

Section on Educational Research, Development Curriculum  
Chair, Dr. Vidya Ramaswamy, University of Michigan  
Councilor, Dr. Se-Lim Oh, University of Maryland

Section on Endodontics  
Chair, Dr. Leticia Guajardo-Morales, UTHealth Houston  
Councilor, Dr. Yaara Berdan, University of Southern California

Section on Evidence-based Dentistry  
Chair, Dr. Hanann Tomeh, A.T. Still University-Arizona  
Councilor, Dr. Jaana Gold, University of Florida

Section on Gerontology and Geriatrics Education  
Chair, Dr. Rohit Nair, The University of Iowa  
Councilor, Dr. Leonardo Marchini, Case Western Reserve University

Section on Minority Affairs  
Chair, Dr. Tawana Lee Ware, Indiana University  
Councilor, Dr. Ethel Harris, Meharry Medical College

Section on Oral and Maxillofacial Pathology  
Chair, Dr. Junu Ojha, University of Detroit Mercy  
Councilor, Dr. Rashidah Tynetta Wiley, California Northstate University

Section on Oral and Maxillofacial Radiology  
Chair, Dr. Rohan Jagtap, University of Mississippi  
Councilor, Dr. Aniket Jadhav, Virginia Commonwealth University

Section on Oral and Maxillofacial Surgery, Anesthesia and Hospital Dentistry  
Chair, Dr. Sabah Kalamchi, A.T. Still University-Arizona  
Councilor, Dr. Faisal A. Quereshy, Case Western Reserve University

Section on Operative Dentistry and Biomaterials  
Chair, Dr. Melissa Ing, Dental Consultant  
Councilor, Dr. Aditi Jain, The University of Iowa

Section on Integrated Clinical and Applied Biomedical Sciences  
Chair, Dr. Anita Joy-Thomas, UTHealth Houston  
Councilor, Dr. Michael G. Schmidt, Medical University of South Carolina

Section on Oral Diagnosis Oral Medicine  
Chair, Dr. Charles Streckfus, UTHealth Houston  
Councilor, Dr. Gargi Mukherji, UTHealth Houston

Section on Orthodontics  
Chair, Dr. Sudha Gudhimella, University of Louisville  
Councilor, Dr. Edmund Khoo, Indiana University
Section on Pediatric Dentistry  
Chair, Dr. Glenn Canares, University of Maryland  
Councilor, Dr. Abimbola Adewumi, University of Florida

Section on Periodontics  
Chair, Dr. Sangeetha Chandrasekaran, University of Colorado  
Councilor, Dr. Robert N. Bitter, Southern Illinois University

Section on Physiology, Pharmacology, and Therapeutics  
Chair, Dr. Jayne Stewart Reuben, Texas A&M University  
Councilor, Dr. Neha Parikh, UTHealth Houston

Section on Practice Management  
Chair, Dr. Aaron Glick, UTHealth Houston  
Councilor, Dr. Dieter Schonwetter, University of Manitoba

Section on Prosthodontics  
Chair, Dr. Cortino Sukotjo, University of Illinois  
Councilor, Dr. John Won, Loma Linda University

Section on Scholarship of Teaching and Learning  
Chair, Dr. Matthew Mara, Boston University  
Councilor, Dr. Nancy Young, Augusta University

Section on Student Affairs and Financial Aid  
Chair, Ms. Susannah Turner, The Ohio State University  
Councilor, Dr. Juliette Daniels, University of Detroit Mercy

Section on Women in Leadership  
Chair, Dr. Michelle Brady, University of the Pacific  
Councilor, Dr. Lavern J. Holyfield, Texas A&M University

ADEA Council of Students, Residents and Fellows  

Administrative Board  
Chair, Ms. Elyse Estra, University of Connecticut  
Vice Chair, Mr. Andrew Halverson, Western University of Health Sciences  
Secretary, Mr. Wyatt Nguyen, University of Colorado  
Member-at-large, Dr. Matthew Scott Wright, Roseman University of Health Sciences

District Commissioners  
Dr. Ishita Aghi, University of Minnesota, District 8  
Abdal Alfarra, University of Southern California, District 11  
Ms. Janika Lanelle James, Meharry Medical College, District 4  
Ms. Jennifer Minnis, Pacific University, District 10  
Ms. Jia Kim, University of Pittsburgh, District 3  
Mr. Tommy Lau, University of Michigan, District 6  
Mr. Shahzad A. Mumtaz, Boston University, District 1  
Ms. Jessica Poon, University of Illinois Chicago, District 7  
Ms. Isabel Schmidt, University of Colorado, District 9  
Ms. Rachel Utomo, Columbia University, District 2
ADEA Corporate Council

Administrative Board
Chair-elect, Mr. Justin Bower, Haleon (formerly GSK)
Secretary, Ms. Karen Raposa, HuFriedy Group
Member-at-Large, Ms. Debora Bridges, ProBiora Health
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 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 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; members of the Council of Students, Residents and Fellows representing each of the 11 districts recognized by the Council; four advanced dental students, residents or fellows (two from hospital-based programs and two from non-hospital-based programs) and six allied dental students (two each from dental hygiene, dental assisting and dental laboratory technology education programs). 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 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 COAEP 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 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 does not require Director membership.
Figure 1: Organizational Structure of the American Dental Education Association

[Diagram showing the organizational structure with sections listed below the Councils level.]
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?

![Diagram showing the process of resolutions being introduced and handled at the Annual Session.]

What Can Happen to a Resolution Introduced Between Annual Sessions

![Diagram showing the process of resolutions being introduced and handled between Annual Sessions.]

Reference Committee on Association Administrative Affairs

House of Delegates

Reference Committee on Association Policy

Delegates

Reference Committee on Association Administrative Affairs

House of Delegates

Reference Committee on Association Policy

President and CEO

Board of Directors

Council(s)

Section(s)

Individual Member
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 2023 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 2023 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. Linda Mabrey, Director, Office of the President and CEO at 202-513-1182 or at Governance@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 Administrative Affairs
ADEA Corporate Council
Chair, Ms. Karen Raposa, HuFriedyGroup

ADEA Council of Advanced Education Programs
Dr. Susan Paurazas, University of Detroit Mercy School of Dentistry

ADEA Council of Allied Dental Program Directors
Prof. Monica Hospenthal, Pierce College

ADEA Council of Deans
Dr. Janet Guthmiller, University of North Carolina at Chapel Hill Adams School of Dentistry

ADEA Council of Faculties
Dr. Eric Gottman, University of Missouri - Kansas City School of Dentistry

ADEA Council of Sections
Ms. Martha Clements, Midwestern University College of Dental Medicine-Arizona

ADEA Council of Students, Residents and Fellows
Mr. Andrew Halverson, Western University of Health Sciences College of Dental Medicine

ADEA Reference Committee on Association Policy
ADEA Corporate Council
Chair, Mr. Justin Bower, Haleon

ADEA Council of Advanced Education Programs
Dr. Thikriat Al-Jewair, University at Buffalo School of Dental Medicine

ADEA Council of Allied Dental Program Directors
Prof. Marion Manski, Virginia Commonwealth University

ADEA Council of Deans
Dr. Rick Black, Texas Tech University Health Sciences Center El Paso Woody Hunt School of Dental Medicine

ADEA Council of Faculties
Dr. Ethelyn Thomason, University of Colorado School of Dental Medicine

ADEA Council of Sections
Dr. Michelle Brady, University of the Pacific, Arthur A. Dugoni School of Dentistry

ADEA Council of Students, Residents and Fellows
Ms. Elyse Estra, University of Connecticut School of Dental Medicine
Resolutions to be Considered by the ADEA House of Delegates

There are 11 resolutions (1H-2023 through 11H-2023) that will be acted upon by the House at its Opening Session on Saturday, March 11, 2023, from 4:30 to 5:30 p.m., and at its Closing Session on Tuesday, March 14, from 3:30 to 4:30 p.m.

In the event that any resolutions are introduced at the Opening Session of the House, they will be referred to the appropriate Reference Committee.

When the Reference Committees meet on Sunday, March 12, any resolutions presented from the floor will be considered by the House at its Closing Session on Tuesday, March 14, from 3:30 to 4:30 p.m. At the Closing Session, the Reference Committee 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

Resolutions 4H-2023 through 7H-2023 will be assigned to the Reference Committee on Association Policy to hear on Sunday, March 12 from 2:00 to 3:00 p.m. Any resolutions introduced at the Opening Session of the House may be referred to this committee.

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

Resolutions 8H-2023 through 11H-2023 will be assigned to the Reference Committee on Administrative Affairs on Sunday, March 12, 4:30 to 5:30 p.m. Any resolutions introduced at the Opening Session of the House may be referred to this committee.
Order of Business of the ADEA House of Delegates

Opening Session—Saturday, March 11, 4:30 – 5:30 p.m.
- Call to Order—Chair of the ADEA Board of Directors, Dr. Nader Nadershahi
- Report of Quorum
- Approval of the Minutes of the Previous Session
- Chair-elect of the ADEA Board of Director’s Address—Dr. Ana N. López-Fuentes
- President and CEO’s Report—Dr. Karen P. West
- Report of the Nominating Committee—Dr. Keith Mays
- Action on Resolutions 1H-2023 to 3H-2023
- Referrals of Reports and Resolutions
- Recess until March 14, 2023, 3:30 p.m.

Closing Session—Tuesday, March 14, 3:30 – 4:30 p.m.
- Call to Order—Chair of the ADEA Board of Directors, Dr. Nader Nadershahi
- Report of Quorum
- Consideration of Reference Committee Reports and Action on Resolutions 4H-2023 to 11H-2023
- Chair of the ADEA Board of Director’s Address—Dr. Nader Nadershahi
- Recognition of Retiring Officers
- Adjournment
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; Advanced Education Programs; and Students, Residents and Fellows must appoint alternates who are members of their Councils. Members of the Council of Sections must appoint the Chair-elect or Secretary of their Sections. 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 credentials 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. Nader Nadershahi—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 their 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 24–26.

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>Yes²</td>
<td>Yes²</td>
<td>Majority</td>
<td>None</td>
<td>Amend, limit debate, close debate</td>
<td>Yes⁶</td>
</tr>
<tr>
<td>Recess</td>
<td>No</td>
<td>Yes</td>
<td>Yes²</td>
<td>Yes²</td>
<td>Majority</td>
<td>None</td>
<td>Amend, limit debate, close debate</td>
<td>Yes⁶</td>
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<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>Yes⁶</td>
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<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>No⁶</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>Yes⁶</td>
</tr>
<tr>
<td>Limit or extend debate</td>
<td>No</td>
<td>Yes</td>
<td>Yes²</td>
<td>Yes²</td>
<td>2/3</td>
<td>Debatable motions</td>
<td>Amend, limit debate, close debate</td>
<td>Yes⁶</td>
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<tr>
<td>Postpone to a certain time</td>
<td>No</td>
<td>Yes</td>
<td>Yes²</td>
<td>Yes²</td>
<td>Majority</td>
<td>Main motion</td>
<td>Amend, close debate, limit debate</td>
<td>Yes⁶</td>
</tr>
<tr>
<td>Refer to committee or board</td>
<td>No</td>
<td>Yes</td>
<td>Yes²</td>
<td>Yes²</td>
<td>Majority</td>
<td>Main motion</td>
<td>Amend, close debate, limit debate</td>
<td>Yes⁶</td>
</tr>
<tr>
<td>Amend</td>
<td>No</td>
<td>Yes</td>
<td>Yes³</td>
<td>Yes</td>
<td>Majority</td>
<td>Re-wordable motions</td>
<td>Close debate, limit debate, amend</td>
<td>No⁶</td>
</tr>
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<td><strong>Main Motions</strong></td>
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<td>a. 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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<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>
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<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>
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<tr>
<td>Adopt in-lieu-of</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Majority</td>
<td>Majority</td>
<td>Referred Main motion</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>
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<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>
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<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>
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<td>Appeal</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Majority</td>
<td>Decision of Chair</td>
<td>Close debate, limit debate</td>
<td>No</td>
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<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>Main motion or subject</td>
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<td>Consider informally</td>
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<td>Yes</td>
<td>No</td>
<td>No</td>
<td>Majority</td>
<td></td>
<td>None</td>
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<td>Point of order</td>
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<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Procedural error</td>
<td>None</td>
<td>No</td>
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<td>Inquiries</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
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<td>All motions</td>
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<td>Withdraw a motion</td>
<td>Yes</td>
<td>No (unless presented as a motion)</td>
<td>No</td>
<td>No</td>
<td>No/§</td>
<td>All motions</td>
<td>None</td>
<td>No</td>
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<td>Division of question</td>
<td>No</td>
<td>No (unless presented as a motion)</td>
<td>No</td>
<td>No</td>
<td>No/§</td>
<td>Main motion</td>
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<td>Division of assembly</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No/§</td>
<td>Indecisive vote</td>
<td>None</td>
<td>No</td>
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</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.
The 2023 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, Journal of Dental Education and on the ADEA website. 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, 2022.

The ADEA Board of Directors Presents the Following Candidates for Chair-elect of the ADEA Board of Directors.

The ADEA Board of Directors has accepted the recommendations of the ADEA Nominating Committee and slated two candidates for the 2023–24 Chair-elect: Jeffery Hicks, D.D.S., and Susan H. Kass, M.Ed., Ed.D., RDH. Following are their personal statements.
Candidate Statements for Chair-elect of the ADEA Board of Directors

Jeffery Hicks, D.D.S.
Professor of Comprehensive Dentistry
UT Health San Antonio School of Dentistry

I am greatly honored to be named a nominee for Chair-elect of the American Dental Education Association Board of Directors. As a long-time faculty and active member of ADEA, I know this nomination is evidence of the many leadership and development opportunities ADEA and others have provided me.

First, ADEA has provided me many opportunities for which I am thankful—as Section Councilor, Chair of two Sections, Chair of Reference Committees, and as Delegate for the ADEA Council of Advanced Education Programs. I also currently serve on the ADEA Policy and Research Advisory Committee. Additionally, participation in the career changing ADEA Leadership Institute allowed me the opportunity to know more closely N. Karl Haden, Ph.D., and the staff and fellows of ADEA.

My most valued professional opportunities and experiences have come from teaching students and residents as Course Director in the UT Health San Antonio School of Dentistry and teaching our medical, physician assistant and nurse practitioner students in the UT Health San Antonio Joe R. and Teresa Lozano Long School of Medicine and UT Health San Antonio School of Health Professions. Through this work, my personal efforts are multiplied in the careers of our past, current and future students and faculty. The opportunities in course leadership, leading curriculum development/evaluation and in faculty mentoring have made my career richer and deeper than I ever could have imagined at its start. In particular, fellow faculty William Hendricson, M.A., M.S., was wonderfully instrumental in aiding my professional development.

My institution provided me the opportunity to serve as Director of Postdoctoral Programs in both Advanced Education in General Dentistry and General Practice Residency, Director of a postdoctoral division and clinics in special care dentistry and hospital dentistry, Chair of a hospital department and Interim Associate Dean for Advanced Education.

My term in 2020-21 as Chair of the Commission on Dental Accreditation, combined with four years’ service as a Commissioner and 30 years’ service as a Site Visitor and Consultant, has deepened my working knowledge of and appreciation for the accreditation process. I am grateful to CODA Director Sherin Tooks and Manager Peggy Soeldner for their many years of advice and counsel.

The opportunity to author and direct over $30 million in federal grants from the U.S. Health Resources and Services Administration (HRSA) has benefitted me and our faculty, residents, students and our underserved and disenfranchised patients. With HRSA, I have served and advocated for care of underserved patients on their Advisory Committee for Training in Primary Care Medicine and Dentistry. And, I have served on the Council on Scientific Affairs for the American Dental Association.
I had the opportunity to serve in domestic dental missions and to lead 12 dental missions to foreign countries teaching students and residents in the care of people with intellectual and developmental disabilities as well as neurotypical individuals.

I have also been given opportunity as a Board Member and President of the Special Care Dentistry Association and Executive Board Member of the American Academy of Developmental Medicine and Dentistry. I’m grateful to Allen Wong, D.D.S., Ed.D., of the University of the Pacific, Arthur A. Dugoni School of Dentistry for his friendship and example.

Whatever the outcome of this nomination, I am confident that through ADEA I’ll continue to have opportunity to lead and advocate for students, residents, faculty and patients.
Susan H. Kass, M.Ed., Ed.D., RDH
Program Coordinator, Dental Hygiene
Miami Dade College

It is a privilege and an honor to be nominated for Chair-elect of the American Dental Education Association Board of Directors. I have been a dental hygiene educator and Program Director at Miami Dade College for over 46 years (how is that possible if I’m only 55 years old!?). The college’s motto and slogan are: I AM MDC and “Opportunity Changes Everything.” I have personally taught a diverse group of more than 2,000 aspiring dental hygienists, with more than 75% of them coming from over 20 foreign countries. I admire their determination and grit, and I remain an educator because of my commitment to them. In recognition of my service to the students and my active involvement in legislative initiatives to enhance student engagement and success, I have been awarded three Endowed Teaching Chairs. I AM MDC. Opportunity Changes Everything.

For over 20 years, I have been involved in the accreditation process starting as a Site Visitor, and currently serve as the Dental Hygiene Commissioner on the American Dental Association Commission on Dental Accreditation for the 2019-2023 term. My time on the Commission has been rewarding and energizing. As a team, we have strived to address COVID-19’s impact on dental education to ensure our institutions continue to meet accreditation standards.

Since 1978, I have attended ADEA’s annual sessions almost every year. I have been involved in a multitude of ADEA programs, which afforded me an incredible platform to learn, grow and engage with others that enhanced my professional leadership. I embrace its mission. I AM ADEA. A source of my most heartfelt pride was serving as a mentor in the inaugural class of the ADEA Allied Dental Faculty Leadership Development Program, and I have continued to serve in each class for several decades ever since. I also attended the ADEA Leadership Institute and despite being the only allied dental member of my cohort, I felt my worth at the table due to the respect awarded by the other participants. I have served on the ADEA Allied Dental Program Directors’ Conference Planning Committee, as a Chair of the Council of Allied Dental Program Directors and then served as the Board Director for the Allied Dental Program Directors from 2012-2015 on the ADEA Board of Directors. One of my most cherished honors was receiving a Chair of the ADEA Board of Directors Citation award in 2016. In addition, I currently serve on the ADEAGies Foundation Board of Trustees.

One of ADEA’s greatest assets is the talent and human resources of our members, who bring innovation and change to our profession. I am passionate about ADEA’s entrustable professional activities (EPAs) and the ADEA “New Thinking for the New Century” topics, and I am looking forward to the subcommittee’s recommendations.

I believe strongly in the need to infuse not only diversity but also a moral perspective into each group’s recommendations moving forward. Our society is becoming increasingly divergent, making ethical disputes more prevalent. Our educational institutions must respond to these challenges with honest recognition and imagination. As educators, we must incorporate these concepts into all aspects of dental education and instill moral courage in our students as we prepare them for their careers.

I am committed to working with ADEA, through its leadership, committees and members at large, to bring this to fruition. My broad, inclusive perspective will be focused on unifying the work to enhance our future together as one dental education profession. I appreciate the opportunity to be considered for the position of Chair-elect of the ADEA Board of Directors. Opportunity Changes Everything. I AM ADEA.
Report of the ADEA Board of Directors on Resolutions for Consideration by the 2023 ADEA House of Delegates

The ADEA House of Delegates will consider the 11 resolutions in this report, plus any additional ones introduced at the Opening Session. The House will act on Resolutions 1H-2023 through 3H-2023 at its Opening Session on Saturday, March 11, 2023, from 4:30 to 5:30 p.m.

The House will act on Resolutions 4H-2023 through 11H 2023 at its Closing Session on Tuesday, March 14, from 3:30 to 4:30 p.m.

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

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

1H-2023 American Dental Association Council on Dental Education and Licensure Member

2H-2023 Commission on Dental Accreditation Member

3H-2023 Appreciations

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

4H-2023 Climate Change and Implications for Health, Oral Health and Oral Health Education

5H-2023 ADEA Policy on Oral Health Providers’ Education and Care for People with Intellectual and Developmental Disorders and Special Health Care Needs

6H-2023 Establishment of an ADEA Position Statement on the Crisis of Historically Underrepresented Men of Color in the Academic Health Professions

7H-2023 ADEA Council of Allied Dental Program Directors 2023 ADEA Competencies for Allied Dental Professions

8H-2023 Provisional Membership of the Northeast Ohio Medical University Bitonte College of Dentistry

9H-2023 Provisional Membership of the Pacific Northwest University of Health Sciences College of Dental Medicine

10H-2023 Provisional Membership of the Universidad Ana G. Méndez School of Dental Medicine

11H-2023 Provisional Membership of the University of Pikeville College of Dental Health

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-2023
American Dental Association Council on Dental Education and Licensure Member

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

- Dr. Steven Lepowsky, University of Connecticut School of Dental Medicine (2023)
- Dr. Kimon Divaris, University of North Carolina at Chapel Hill Adams School of Dentistry (2024)
- Dr. Shandra Keith Coble, University of Alabama at Birmingham School of Dentistry (2025)
- Dr. Maureen McAndrew, NYU College of Dentistry (2026)

Dr. Lepowsky’s term on the ADA CDEL will be completed this fall at the close of the 2023 ADA Annual Session. Thus, the 2023 ADEA House of Delegates will have to appoint a new ADA CDEL member. To succeed Dr. Lepowsky on the Council, the ADEA Board of Directors is recommending that the ADEA House of Delegates elect Dr. Brian Howe, The University of Iowa College of Dentistry & Dental Clinics, to a four-year term to expire in 2027.

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.

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

1H-2023 Resolved, that the ADEA House of Delegates appoint Dr. Brian Howe to a four-year term on the ADA Council on Dental Education and Licensure with the term to begin at the close of the 2023 ADA Annual Session and conclude at the 2027 ADA Annual Session.
The current ADEA representatives on the Commission on Dental Accreditation (CODA) and their termination dates (in the fall of the years shown) are:

- Dr. Amid Ismail, The Maurice H. Kornberg School of Dentistry, Temple University (2023)
- Dr. Carol-Anne Murdoch-Kinch, Indiana University School of Dentistry (2024)
- Dr. Frank Licari, Roseman University of Health Sciences College of Dental Medicine – South Jordan, Utah (2025)
- Dr. Cataldo Leone, Boston University Henry M. Goldman School of Dental Medicine (2026)

Dr. Murdoch-Kinch’s appointment as a Commissioner will end at the close of the 2024 ADA Annual Session. In 2011, the Commission adopted an enhanced six-month training period for all new Commissioners, thus requiring sponsoring organizations to appoint new Commissioners in advance to participate in the additional training, which will occur in fall 2023.

The ADEA Board of Directors is recommending that the 2023 ADEA House of Delegates elect Dr. Keith Mays, University of Minnesota School of Dentistry, to a four-year term beginning Fall 2024 and to expire in 2028.

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.

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

2H-2023 Resolved, that the ADEA House of Delegates appoint Dr. Keith Mays to a four-year term (2024-2028) on the Commission on Dental Accreditation.
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. ADEA is especially grateful to all our sponsors that supported us as we got back to in person meetings and events.

ADEA Corporate Council collectively supported the Opening Plenary and the 2022 ADEA Diversity, Equity, Inclusion and Belonging Workshop at the 2022 ADEA Annual Session & Exhibition. They also sponsored the 2022 ADEA Advanced Dental Education Summit.

Acadental was a general sponsor of the 2022 ADEA Allied Dental Program Directors’ Conference.

A-dec was the Welcome Reception sponsor at the 2022 ADEA Annual Session & Exhibition, the sponsor of the 2022 ADEA COSRF Chapter Awards Reception, Sunday Networking Reception sponsor for the 2022 ADEA Allied Dental Program Directors’ Conference, the Networking Reception at the 2022 ADEA BFACA Meeting and the sponsor of the Sunday Luncheon at the 2022 ADEA Deans’ Conference.

Aegis Dental Network sponsored the Opening Reception at the 2022 ADEA Deans’ Conference.

Air Techniques, Inc. sponsored both the 2022 ADEA BFACA Meeting and the 2022 ADEA Deans’ Conference.

Align Technologies, Inc. sponsored both the 2022 ADEA Advanced Dental Education Summit and the 2022 ADEA Deans’ Conference.


American Association for Dental, Oral, and Craniofacial Research was a sponsor of the 2022 ADEA President’s Symposium on Men of Color in the Health Professions.

American Association of Endodontists Foundation supported the ADEA/American Association of Endodontists Foundation Scholar in the ADEA Leadership Institute.

American Association of Orthodontists Foundation supported the 2022 Gies Awards for Vision, Innovation & Achievement.

American College of Dentists supported the ADEA/American College of Dentists Dr. Jerome Bright Miller Scholars in the ADEA Leadership Institute.
American Dental Association supported the 2022 Gies Awards for Vision, Innovation & Achievement.

Bien Air USA sponsored both the 2022 ADEA BFACA Meeting and the 2022 ADEA Deans’ Conference.

Brasseler USA sponsored both the 2022 ADEA BFACA Meeting and the 2022 ADEA Deans’ Conference.

Carestream Dental sponsored the 2022 ADEA Deans’ Conference.

Colgate Oral Pharmaceuticals, Inc. (formerly Colgate-Palmolive Company) 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 Excellence in Teaching Award, ADEA/ADEA Council of Students/Colgate-Palmolive Junior Faculty Award, ADEA/Colgate-Palmolive Co./Dominick P. DePaola Scholar in the ADEA Leadership Institute and sponsored the 2022 ADEA Allied Dental Program Directors’ Conference, the 2022 ADEA BFACA Meeting and the 2022 ADEA Deans’ Conference.

Columbia University College of Dental Medicine supported the 2022 Gies Awards for Vision, Innovation & Achievement.

DentalEZ sponsored both the 2022 ADEA BFACA Meeting and the 2022 ADEA Deans’ Conference.

Dentsply Sirona, Inc. supported the 2022 Gies Awards for Vision, Innovation & Achievement; provided sponsorship to the 2022 ADEA Student Poster Competition at the 2022 ADEA Annual Session & Exhibition; and general sponsorship of both the 2022 ADEA Allied Dental Program Directors’ Conference and 2022 ADEA Deans’ Conference.

Envista sponsored both the 2022 ADEA BFACA Meeting and the 2022 ADEA Deans’ Conference.

Haleon (formerly GSK Consumer Healthcare) supported the 2022 Gies Awards for Vision, Innovation & Achievement and the ADEA/GlaxoSmithKline Consumer Healthcare Preventive Dentistry Scholarship. They also sponsored the 2022 ADEA Tapestry Table®, the Closing Plenary Session at the 2022 ADEA Annual Session & Exhibition, the 2022 ADEA Allied Dental Program Directors’ Conference, the 2022 ADEA BFACA Meeting and the 2022 ADEA Deans’ Conference.

Harvard University School of Dental Medicine supported the 2022 Gies Awards for Vision, Innovation & Achievement.

Heartland Dental sponsored the Headshot Café at the 2022 ADEA Annual Session & Exhibition, the 2022 ADEA Allied Dental Program Directors’ Conference and the 2022 ADEA Deans’ Conference.

Henry Schein, Inc. supported the 2022 Gies Awards for Vision, Innovation & Achievement and sponsored both the 2022 ADEA BFACA Meeting and the 2022 ADEA Deans’ Conference.

Howard University College of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.
HuFriedyGroup (formerly Hu-Friedy Manufacturing Co., LLC) supported the 2022 Gies Awards for Vision, Innovation & Achievement, sponsored the Welcome Reception at the 2022 ADEA Annual Session & Exhibition, the Saturday Networking Reception/Dinner at the 2022 ADEA Allied Dental Program Directors’ Conference, the Networking Reception at the 2022 ADEA BFACA Meeting and was a general sponsor of the 2022 ADEA Deans’ Conference.

Indiana University School of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

JAZZ Imaging sponsored the 2022 ADEA Deans’ Conference.

Johnson & Johnson Consumer Inc. provided general sponsorship of the 2022 ADEA Allied Dental Program Directors’ Conference.

Kahler Slater sponsored both the 2022 ADEA BFACA Meeting and the 2022 ADEA Deans’ Conference.

Kansas City University College of Dental Medicine supported the 2022 Gies Awards for Vision, Innovation & Achievement.

Komet USA LLC sponsored the 2022 ADEA Advanced Dental Education Summit, the 2022 ADEA BFACA Meeting and the 2022 ADEA Deans’ Conference.

LM-Dental, a Planmeca Group Company sponsored the 2022 ADEA Allied Dental Program Directors’ Conference, the 2022 ADEA BFACA Meeting and the 2022 ADEA Deans’ Conference.

Liaison International, Inc. supported both the Liaison International Educational Pathways Fellowship and the 2022 Gies Awards for Vision, Innovation & Achievement.

Loma Linda University School of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

Louisiana State University Health New Orleans School of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

Marquette University School of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

Medical University of South Carolina James B. Edwards College of Dental Medicine supported the 2022 Gies Awards for Vision, Innovation & Achievement.

Meharry Medical College School of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

Midmark Corporation sponsored the 2022 ADEA Advanced Dental Education Summit, the 2022 ADEA BFACA Meeting and the 2022 ADEA Deans’ Conference.

Mouthwatch, LLC supported the ADEA/MouthWatch Predoctoral Dental Student Scholarship for Innovation Award and the ADEA/MouthWatch Patti DiGangi Scholarship for Hygiene Innovation Award.
National Dental Association supported the ADEA/Colgate-Palmolive Co./National Dental Association Dr. Jeanne C. Sinkford Scholarship in the ADEA Leadership Institute.

NYU College of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

NSK America sponsored both the 2022 ADEA BFACA Meeting and the 2022 ADEA Deans’ Conference.

Orapharma, a subsidiary of Bausch Health US, LLC sponsored the 2022 ADEA Allied Dental Program Directors’ Conference.

Pacific Dental Services supported the 2022 Gies Awards for Vision, Innovation & Achievement and sponsored the 2022 ADEA Deans’ Institute.

Patterson Dental sponsored the 2022 ADEA Allied Dental Program Directors’ Conference.

PDT, Inc. – Paradise Dental Technologies sponsored the 2022 ADEA Allied Dental Program Directors’ Conference, the 2022 ADEA BFACA Meeting and the 2022 ADEA Deans’ Conference.

Philips Oral Healthcare, Inc. sponsored the 2022 ADEA Allied Dental Program Directors’ Conference.

Planmeca USA, Inc. sponsored the 2022 ADEA Advanced Dental Education Summit and the 2022 ADEA Deans’ Conference.

Procter & Gamble Company supported the 2022 Gies Awards for Vision, Innovation & Achievement, the ADEA/Crest Oral-B Laboratories Scholarship for Dental Hygiene Students Pursuing Academic Careers and the ADEA/Crest Oral-B Scholarship for Predoctoral Dental Students Pursuing Academic Careers. They also sponsored the ADEA Deans’ Institute, 2022 ADEA Tapestry Table®, the Student Diversity Leadership Program, the Sunday Networking Breakfast at the 2022 ADEA Allied Dental Program Directors’ Conference, the Networking Lunch at the 2022 ADEA BFACA Meeting and the Sunday Networking Breakfast at the ADEA Deans’ Conference.

Roseman University of Health Sciences College of Dental Medicine-South Jordan, Utah supported the 2022 Gies Awards for Vision, Innovation & Achievement.

Rutgers, The State University of New Jersey, School of Dental Medicine supported the 2022 Gies Awards for Vision, Innovation & Achievement.

Sigma Phi Alpha supported the ADEA/Sigma Phi Alpha Linda DeVore Scholarship.

Smile Brands, Inc. sponsored the 2022 ADEA Allied Dental Program Directors’ Conference.

Stony Brook University School of Dental Medicine supported the 2022 Gies Awards for Vision, Innovation & Achievement.

Texas A&M University School of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.
Tufts University School of Dental Medicine supported the 2022 Gies Awards for Vision, Innovation & Achievement.

University of California, San Francisco, School of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

University of Connecticut School of Dental Medicine supported the 2022 Gies Awards for Vision, Innovation & Achievement.

University of Florida College of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

University of Maryland School of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

University of Michigan School of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

University of Minnesota School of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

University of Missouri-Kansas City School of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

University of North Carolina at Chapel Hill Adams School of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

University of Pittsburgh School of Dental Medicine supported the 2022 Gies Awards for Vision, Innovation & Achievement.

University of Tennessee Health Science Center College of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

University of Toronto Faculty of Dentistry supported the 2022 Gies Awards for Vision, Innovation & Achievement.

VitalSource Technologies, Inc. sponsored the 2022 ADEA Deans’ Conference.

Western University of Health Sciences College of Dental Medicine supported the 2022 Gies Awards for Vision, Innovation & Achievement.

Whip Mix Corporation sponsored the 2022 Section on Prosthodontics Meeting.

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

3H-2023 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 2022 ADEA Annual Session & Exhibition and the start of the 2023 ADEA Annual Session & Exhibition:
ADEA Corporate Council
Acadental
A-dec
Aegis Dental Network
Air Techniques, Inc.
Align Technologies, Inc.
A.T. Still University Arizona School of Dentistry & Oral Health
American Association of Dental, Oral, and Craniofacial Research
American Association of Endodontists Foundation
American Association of Orthodontists Foundation
American College of Dentists
American Dental Association
Bien Air USA
Brasseler USA
Carestream Dental
Colgate Oral Pharmaceuticals, Inc. (formerly Colgate-Palmolive Company)
Columbia University College of Dental Medicine
DentalEZ
Dentsply Sirona, Inc.
Envista
Haleon (formerly GSK Consumer Healthcare)
Harvard University School of Dental Medicine
Heartland Dental
Henry Schein, Inc.
Howard University College of Dentistry
HuFriedyGroup (formerly Hu-Friedy Manufacturing Co., LLC)
Indiana University School of Dentistry
JAZZ Imaging
Johnson & Johnson Consumer Inc.
Kahler Slater
Kansas City University College of Dental Medicine
Komet USA LLC
LM-Dental, a Planmeca Group Company
Liaison International, Inc.
Loma Linda University School of Dentistry
Louisiana State University Health New Orleans School of Dentistry
Marquette University School of Dentistry
Medical University of South Carolina James B. Edwards College of Dental Medicine
Meharry Medical College School of Dentistry
Midmark Corporation
Mouthwatch, LLC
National Dental Association
NYU College of Dentistry
NSK America
Orapharma, a subsidiary of Bausch Health US, LLC
Pacific Dental Services
Patterson Dental
PDT, Inc. - Paradise Dental Technologies
Philips Oral Healthcare, Inc.
Planmeca USA
Procter & Gamble Company

2023 ADEA House of Delegates Manual
Roseman University of Health Sciences College of Dental Medicine – South Jordan, Utah
Rutgers, The State University of New Jersey, School of Dental Medicine
Sigma Phi Alpha
Smile Brands, Inc.
Stony Brook University School of Dental Medicine
Texas A&M University School of Dentistry
Tufts University School of Dental Medicine
University of California, San Francisco, School of Dentistry
University of Connecticut School of Dental Medicine
University of Florida 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 North Carolina at Chapel Hill Adams School of Dentistry
University of Pittsburgh School of Dental Medicine
University of Tennessee Health Science Center College of Dentistry
University of Toronto Faculty of Dentistry
VitalSource Technologies, Inc.
Western University of Health Sciences College of Dental Medicine
Whip Mix Corporation
Actions at the Closing Session of the ADEA House of Delegates

Resolution 4H-2023
Climate Change and Implications for Health, Oral Health and Oral Health Education

Background: According to World Health Organization, “Climate change (is) the biggest health threat facing humanity” and according to the NIH, “Climate change greatly elevates threats to human health across a wide range of illnesses and injuries …” and describes the need to address issues as being “urgent”. Few articles have been published regarding the impact of climate change on the intersection between oral health, overall health and education. There is a need to provide an evidence-based and robust curriculum to oral health educators on these topics.

Two domains of concern will be addressed:

1. The impact of oral health care and dental education on climate change.
   - Waste from health care procedures is significant (WHO, 2018; Martin, 2011). It is incumbent upon the dental profession to promote evidence-based prevention and management of head and neck, oral and other diseases, not only for the benefit of patient health, but also to reduce the number of dental procedures and the resulting waste and cost.
   - The profession utilizes single-use, disposable items to reduce the potential exposure to contamination; in institutions that provide oral health care, this results in a significant amount of non-recyclable waste each day. There is a need to develop “best practices” that can minimize the overuse of single-use, non-recyclable items while still maintaining adequate infection-control practices.
   - Reducing the “Transportation Footprint” can be addressed by embracing teledentistry, by training and utilizing allied health professionals who are local to patients, and by the robust implementation of digital dentistry (FDI Sustainability in Dentistry, 2022).
   - Dental amalgam waste: At the 2021 United Nations Minimata Convention on Dental Amalgam, the U.S. delegates committed to finding mercury-free alternatives to dental amalgam as a restorative material. This change has a significant impact on education and training.
   - Using “big data” analytics to better understand the crosswalk of oral health and overall health, and the creation of a workforce that can best utilize the continuing advances that science can provide.

2. The impact of climate change on oral and overall health.
   - Novel, transmissible, virulent pathogens that emerge as a result of climate change can lead to a widespread impact on access to care, particularly for vulnerable patients.
   - Changes in climate (drought, floods, temperature changes, storms) can result in national and global emergencies, with downstream consequences on survival, health and access to care. Vulnerable patients are more likely to be adversely affected in these events. Global preparation and training for calamities is a necessity.
   - Numerous illnesses linked to climate change include asthma and other lung illnesses, pre-term birth, vector-borne diseases (water, food, insects) and mental health and stress-related disorders (National Climate Assessment and Human Health, 2022).
   - Climate change can result in an increased need for medications that cause xerostomia, leading to increased dental caries.
The development of measures to address these two domains require a significant review and evaluation of scientific data to develop best practices, education and training of educators, members of the workforce, and patients.

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

**4H-2023**

Resolved, that ADEA encourages and supports oral health care education programs to utilize scientific evidence to integrate policies and education on the impact of:

1. Global oral health care and education on the climate,

and

2. Climate change on oral and overall health into their programs.
Resolution 5H-2023
ADEA Policy on Oral Health Providers’ Education and Care for People with Intellectual and Developmental Disorders and Special Health Care Needs

Background: There are 61 million Americans who live with a disability. Two in five adults aged 65 and older and one in four women are living with a disability. Seven million of these disabilities are people with intellectual and developmental disabilities (IDD). People with IDD face multiple oral health and systemic conditions. Although oral health care is essential to maintaining overall health and well-being, maintaining access to oral health care is one of the more significant problems faced by this underserved population. Early diagnosis is crucial to prevent disease progression and manage the conditions and behavior. Access to care is a problem for many Americans, where one in three adults with disabilities (aged 18 to 44 years) does not have a regular health care provider. The lack of access is more pronounced with People with IDD, such as Down syndrome, Fragile X syndrome, autism spectrum disorder, fetal alcohol syndrome, and other conditions. People with IDD experience a lack of care due to a shortage of adequately trained dental care providers who are willing to provide that care. While many people with IDD can access developmental pediatricians when they are children, it can be challenging to find trained providers when they transition to adulthood. The ADA Principles of Ethics and Code of Professional Conduct indicate that “…dentists shall not refuse to accept patients into their practice or deny service to patients because of the patient’s … disability”. This statement elevates the provision of treatment for individuals with IDD to being a professional obligation for dentists. In a survey of training of health care professionals, more than 50% of medical and dental school deans report that graduates of their programs are “not competent” to treat people with IDD.

The purpose of this resolution is to acknowledge and support the importance of education and care for persons with IDD. This policy will demonstrate that ADEA recognizes the importance of enhancing the quality and capacity of oral health professionals to provide access to care for persons with IDD through education, practice, and reimbursement training programs for more significant oral health equity.

References
Resolved, that ADEA supports and encourages the education of students, professionals and the public on activities, curricula, clinical experiences, continuing education and delivery models that will promote equitable oral health for people with intellectual and developmental disorders and other special health care needs.
Resolution 6H-2023
Establishment of an ADEA Position Statement on the Crisis of Historically Underrepresented Men of Color in the Academic Health Professions

The ADEA Diversity and Inclusion Advisory Committee proposes the establishment of an ADEA statement on the crisis of historically underrepresented men of color in the academic health professions.

Background: Systemic racism and the oppression of people of color have resulted in significant disparities in the number of men of color (MOC) matriculating and graduating from the academic health professions. Historically underrepresented MOC refer to men from racial and ethnic populations in the health professions who lack parity relative to their numbers in the U.S. general population. Historically underrepresented MOC are disproportionately underrepresented in the health professions at all levels compared with other racial/ethnic and/or gender counterparts.

According to American Dental Association data, there were 6,665 U.S. dental school graduates in 2021, of which 3,223 were men. Of the total 2021 dental school graduates, historically underrepresented MOC comprised only 6.46%, or 431, of all 2021 dental school graduates (147 Black/African American men, 18 American Indian/Alaska Native men, 3 Native Hawaiian/Other Pacific Islander men, and 263 Hispanic/Latino men). Additionally, the two Historically Black Colleges and University dental schools, Meharry Medical College School of Dentistry and Howard University College of Dentistry, accounted for 36, or 24.5%, of the 147 Black/African American men graduates, and the University of Puerto Rico School of Dental Medicine accounted for 18, or 6.8%, of the 263 Hispanic/Latino men graduates in 2021.

Similar disparities exist across the academic health professions. For example, Association of American Medical Colleges 2021-2022 data show there were 21,051 total U.S. medical school graduates, of which 10,268 were men. Of the total number of graduates, only 13 were American Indian/Alaska Native men, 565 African American/Black, 664 Hispanic/Latino/Spanish origin, and 9 Native Hawaiian/Other Pacific Islander men.

A continued lack of awareness, marginalization, educational disparities and unconscious bias have led to these continuing inequalities and a dearth of historically underrepresented MOC matriculating and graduating in the academic health professions, which has now reached crisis proportions. This crisis is further reflected by the lack of MOC in faculty and key staff positions at academic health science institutions, racial/ethnic disparities among health professions institutions in elevating MOC faculty and administrators to leadership positions, and in racial/ethnic health inequities and health outcomes for patient populations in the United States.

The lack of historically underrepresented MOC in the health professions extends well beyond the specifics of low numbers and has significant consequences for public health, education, economic stability and health care treatment for all communities and facets of the United States population. For example, in 2019, 9.5% of U.S. dentists were part of historically underrepresented racial/ethnic (HURE) groups, but HURE groups comprised almost a third of the U.S. population (31.9%) in the same year.

MOC are disproportionately under-recruited and retained throughout the K-12, college and graduate education pathways, which creates a national workforce shortage of racially and ethnically diverse health care providers in many professions and communities. Failure to adequately address the underrepresentation of MOC in the health professions will perpetuate
and worsen education; health disparities, particularly for underserved communities; and
adequate access to health care for all populations.

Entities of health professional practice, research, education and policy have the individual and
collective ethical and moral responsibility to prioritize increasing the presence of MOC in the
health professions. The systemic barriers to equity (financial, educational, access and others)
must be dismantled. While pathway programs, mentorship, pre-health advising and holistic
admissions are a start, they are insufficient to address the crisis that historically
underrepresented MOC face. Expansion of these initiatives and new solutions are urgently
needed.

Consistent with the revised 2016 “ADEA Statement of Policy on Diversity and Inclusion” and the
2021 “ADEA Policy Statement on the Prevention and Elimination of Racism, Harassment,
Discrimination, and Bias in Dental Education,” the ADEA Diversity and Inclusion Advisory
Committee seeks to establish a public position on the crisis of the lack of historically
underrepresented MOC in the health professions and asks the ADEA House of Delegates to
approve the following resolution.

References
1. American Dental Association Health Policy Institute. Table 13: Graduates of Predoctoral
2. Id.
4. Id.
5. American Dental Education Association. Slow to Change: HURE Groups in Dental

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

6H-2023 Resolved, that the ADEA House of Delegates approves, accepts and endorses
the establishment of a Position Statement on the Crisis of Historically
Underrepresented Men of Color in the Academic Health Professions to read as
follows, effective at the close of the 2023 ADEA Annual Session & Exhibition:

The historic and ongoing crisis regarding the lack of historically
underrepresented men of color matriculating to and graduating in oral health
education and the other academic health professions has debilitating
ramifications. Research strongly indicates that intentional actions such as
mentorship, scholarships, pathway programs, inclusive pedagogy, unconscious
bias training for educators, and fostering a humanistic, inclusive and welcoming
environment that supports belonging can move the needle forward to positively
impact men of color entering the health professions and reverberate throughout
the health care system and save lives.

Therefore, ADEA calls for intentional collaborative efforts within oral health
education and across the academic health professions, health care organizations,
professional health associations, state and federal government, private
foundations, educators, partners and stakeholders to develop strategies and
implement short-term and longitudinal programs to eliminate pathway barriers and improve the parity between the U.S. general population for historically underrepresented men of color in oral health care and across the health professions.
Resolution 7H-2023
ADEA Council of Allied Dental Program Directors
2023 ADEA Competencies for Allied Dental Professions

Background: This is the third update to the ADEA Competencies for Allied Dental Professionals since the first document was produced in 1998-99. The revisions reflect contemporary practice and the current state, national and global changes in our health care environment. Recognition of common core skills required of the dental team necessitates an adjustment in the conception of education for the dental workforce. Specifically, the dental workforce must reflect collaborative practice and the interrelated health knowledge among all dental roles in order to deliver ethical and equitable person-centered care emphasizing evidence-based practice, quality assurance and informatics. As members of inter- and intraprofessional teams, core competencies reflect the diversity and anticipation of an evolving dental workforce, and their critical role as a part of the health care team. The proposed competencies embrace the vision of an integrated and cooperative approach to dental education utilizing global methodologies to create a common future for best practices in oral health care.

Proposed Update:

ADEA Workgroup
Entry-level Competencies for Allied Dental Professionals

Note: This document was developed as a collaboration among the three American Dental Education Association (ADEA) allied dental professional disciplines.

Contributors:

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The ADEA Board of Directors and the ADEA Council of Allied Dental Program Directors  
Administrative Board asks the ADEA House of Delegates to approve the following resolution:

7H-2023  
Resolved, that the ADEA House of Delegates approves the adoption of the 2023 ADEA Competencies for Allied Dental Professions as presented below, effective at the close of the 2023 ADEA Annual Session & Exhibition.
Preamble

Dental health professionals require interrelated health knowledge in order to deliver ethical and equitable person-centered care. They are members of inter- and intraprofessional teams, emphasizing evidence-based practice, quality assurance and informatics.

The dental workforce is comprised of dental assistants, dental hygienists, dental laboratory technicians, dentists and all advanced and future dental practitioners. All dental health care providers collaborate with one another and related professionals to deliver continuing oral care and support patients by addressing health care issues affecting society. The allied dental professional must have a broad-based education and experience to demonstrate professional and ethical behavior. This includes employing effective communication and interpersonal skills, using emerging trends and technologies, applying critical thinking skills and addressing health care issues. To enhance personal and professional development, including opportunities for career expansion, dental professionals’ participation in continuing education and lifelong learning is vital.

This document addresses the Core and Discipline-specific Competencies for the allied dental professions (dental assisting, dental hygiene and dental laboratory technology) that provide characteristics of conduct found among all dental professionals. The Core Competencies include:

- **Professional Knowledge**: 1) Professionalism, 2) Safety, 3) Critical Thinking and 4) Scientific Inquiry and Research
- **Health Promotion and Disease Prevention**: 1) Health Education and Community Connection and 2) Advocacy
- **Professional Development and Practice**: 1) Professional Growth, 2) Business Practices and 3) Leadership

The Core and Discipline-specific Competencies provide a framework for the development of an entry-level curriculum as part of the educational process for the new practitioner. This framework embraces the intent of high-quality and culturally aware care for all persons.

This document was developed by three allied dental health disciplines. As experts in each of the three professions, groups from dental assisting, dental hygiene and dental laboratory technology crafted specific competencies for their individual disciplines. Furthermore, each allied dental profession was represented equally to create Discipline-specific Competencies.
related to the specific scopes of practice. These competencies are focused on foundational scientific knowledge, patient care and skills required of each profession.

This document is intended for use by new and existing programs for future innovation, growth and expansion. It supports curricular modifications and serves to educate other professionals about curricular priorities in allied dental education. The content assists in understanding the roles of oral health care professionals. This document is advisory in nature; it is not intended to standardize educational programs and should be used in conjunction with other professional resources. It is also not intended to serve as a validation for program content within allied dental education or for written or clinical licensing examinations.

Allied Dental Core Competencies

Professional Knowledge

1. Professionalism
   1.1 Apply professional values and ethics in all endeavors.
   1.2 Adhere to accreditation standards and federal, state and local laws and regulations.
   1.3 Promote quality assurance practices based on accepted standards of care.
   1.4 Demonstrate interpersonal skills to effectively communicate and collaborate with professionals and patients across socioeconomic and cultural backgrounds.

2. Safety
   2.1 Comply with local, state and federal regulations concerning infection control protocols for blood-borne and respiratory pathogens, other infectious diseases and hazardous materials.
   2.2 Follow manufacturers’ recommendations related to materials and equipment used in practice.
   2.3 Establish and enforce mechanisms to ensure the management of emergencies.
   2.4 Use security guidelines and compliance training to create and maintain a safe, eco-friendly and sustainable practice compatible with emerging trends.
   2.5 Ensure a humanistic approach to care.
   2.6 Uphold a respectful and emotionally safe environment for patients and practitioners.

3. Critical Thinking
   3.1 Demonstrate critical and analytical reasoning to identify and develop comprehensive oral health care solutions and protocols.
   3.2 Apply individual and population risk factors, social determinants of health and scientific research to promote improved health and enhanced quality of life.

4. Scientific Inquiry and Research
   4.1 Support research activities and develop research skills.
   4.2 Use evidence-based decision-making to evaluate and implement health care strategies aligned with emerging trends to achieve high-quality, cost-effective and humanistic care.
   4.3 Integrate accepted scientific theories and research into educational, preventive and therapeutic oral health services.

Health Promotion and Disease Prevention

5. Health Education and Community Connection
   5.1 Endorse health literacy and disease prevention.
   5.2 Communicate and provide health education and oral self-care to diverse populations.
   5.3 Facilitate learning platforms for communities of interest by providing health education through collaboration with dental and other professionals.
5.4 Promote the values of the dental profession through service-based activities.
5.5 Evaluate outcomes for future activities supporting health and wellness of individuals and communities.

6. Advocacy
6.1 Promote an ethical and equitable patient care and practice environment by demonstrating inclusion of diverse beliefs and values.
6.2 Uphold civic and social engagement through active involvement in professional affiliations to advance oral health.

Professional Development and Practice
7. Professional Growth
7.1 Commit to lifelong learning for professional and career opportunities in a variety of roles and settings.
7.2 Engage in research, education, industry involvement, technological and professional developments and/or advanced degrees.
7.3 Demonstrate self-awareness through reflective assessment for continued improvement.

8. Business Practices
8.1 Facilitate referrals to and consultations with relevant health care providers and other professionals to promote equitable and optimal patient care.
8.2 Promote economic growth and sustainability by meeting practice goals.
8.3 Create and maintain comprehensive, timely and accurate records.
8.4 Protect privacy, confidentiality and security of the patients and the practice by complying with legislation, practice standards, ethics and organizational policies.

9. Leadership
9.1 Develop and use effective strategies to facilitate change.
9.2 Inspire and network with others to nurture collegial affiliations.
9.3 Solicit and provide constructive feedback to promote professional growth of self.

Discipline-specific Competencies—Dental Assisting
The dental assisting competencies are the continuation of the allied dental core competencies and both should be viewed as a single framework for this discipline. Dental assistants are integral members of the dental team requiring dedication, personal responsibility, integrity and a commitment to continuing education. They advocate for patients and collaborate with other professionals in providing safe, ethical and clinical oral health care. In addition to the clinical role, dental assistants possess experience related to administration and laboratory functions.

DA. 1 Essential Knowledge
DA. 1.1 Recognize the implications of the interrelationship of the following sciences on the diagnosis, treatment and management of dental diseases:
   • Microbiology
   • Human anatomy and physiology
   • Human cellular biology
   • Embryological and histological development of the hard and soft tissues of the head and neck
   • Anatomical and physiological features for the dentition
   • General and oral pathology
   • Nutrition
   • Pharmacokinetics
DA. 1.2 Relate to patients’ intellectual and psychosocial development and growth throughout their lifespan.

DA. 1.3 Possess a level of background knowledge and skill necessary to be competent with the current dental materials and technologies used for direct restorative procedures, indirect restorative procedures, fixed and removable prostheses and the recognized specialties.

DA. 2 Person-centered Care

2.1 Assessment

DA. 2.1.1 Collect, analyze, record and communicate diagnostic data on the general and oral health status of diverse patients and communities.

DA. 2.1.2 Produce dental images of diagnostic quality using as low as reasonably achievable (ALARA) and/or appropriate safety principles.

DA. 2.1.3 Identify relevant factors associated with medication dosage and administration for prescription and over-the-counter drugs commonly used in dentistry and medicine.

DA. 2.1.4 Assist in the development of a comprehensive treatment plan or program that is reflective of the general and oral health needs of the individual patient.

2.2 Chairside Skills

DA. 2.2.1 Select and assemble the appropriate materials and armamentarium for general and specialized patient care.

DA. 2.2.2 Demonstrate ergonomic and safe instrument transfer techniques.

DA. 2.2.3 Manage medical and dental emergencies, including current basic life support and first aid.

DA. 2.2.4 Perform chairside and expanded function procedures as permitted by the state statutes and regulations.

DA. 2.2.5 Educate patients on caries and periodontal disease prevention.

DA. 2.2.6 Provide recommendations for nutritional needs as they relate to oral health.

DA. 2.2.7 Inform patients of pre- and post-operative instructions for preventive, restorative and specialty dental procedures.

DA. 2.2.8 Demonstrate isolation and evacuation techniques for intraoral procedures.

2.3 Administrative Skills

DA. 2.3.1 Support administrative roles in the dental practice.

DA. 2.3.2 Demonstrate proficiency in strategies that support practice management.

DA. 2.3.3 Possess familiarity with software and hardware used in administrative processes.

Discipline-specific Competencies—Dental Hygiene

The dental hygiene competencies are the continuation of the allied dental core competencies, and both should be viewed as a single framework for this discipline. Dental hygienists are oral health professionals who specialize in the identification, prevention and management of oral diseases. Dental hygienists provide evidence-based, person-centered care through assessment, diagnosis, planning, implementation, evaluation and documentation. They practice in collaboration with dental and other professionals in a variety of settings to recognize the oral-systemic connection for improvement of oral health, general health and well-being of individuals, communities and populations.

DH. 1 Essential Knowledge

DH. 1.1 Apply the knowledge of the following sciences during the dental hygiene process of care:

- Microbiology
- Human anatomy and physiology
DH. 1.2 Apply the knowledge of the following behavioral sciences during the dental hygiene process of care:

- Sociology
- Psychology
- Interpersonal communication

DH. 2 Person-centered Care

2.1 Assessment

DH. 2.1.1 Accurately collect and document a comprehensive medical, dental, social health history and diagnostic data.

DH. 2.1.2 Critically analyze all collected data.

DH. 2.1.3 Identify predisposing, etiologic, environmental and social risk factors for person-centered care.

2.2 Dental Hygiene Diagnosis

DH. 2.2.1 Analyze comprehensive medical, dental and social health history.

DH. 2.2.2 Integrate observational and diagnostic data as part of the dental hygiene diagnosis.

DH. 2.2.3 Use predisposing, etiologic, environmental and social risk factors for person-centered care.

2.3 Planning

DH. 2.3.1 Use the patient’s assessment to establish an optimal and realistic, person-centered dental hygiene care plan through mutual communication.

DH. 2.3.2 Use all aspects of the dental hygiene diagnosis in combination with the person’s values, beliefs and preferences to develop a dental hygiene care plan through shared decision-making.

2.4 Implementation

DH. 2.4.1 Obtain informed consent based on the agreed-upon treatment plan.

DH. 2.4.2 Execute individualized treatment based on the patient’s dental hygiene diagnosis.

DH. 2.4.3 Integrate educational, preventive and therapeutic services to provide comprehensive person-centered care.

DH. 2.4.4 Use specialized skills and evidenced-based technology to promote dental and periodontal health.

DH. 2.4.5 Continuously re-evaluate for modifications to achieve desired outcomes.

2.5 Evaluation and Documentation

DH. 2.5.1 Evaluate the effectiveness of completed services.

DH. 2.5.2 Analyze treatment outcomes of the dental hygiene process of care to determine improved health and modifications.

DH. 2.5.3 Modify dental hygiene care plans as necessary to meet goals of patient and clinician.

DH. 2.5.4 Identify necessary referrals for success of the treatment outcomes, including intraprofessional and interprofessional health care providers, supporting professions and patient advocates.
DH. 2.5.5 Accurately document assessment findings and data, dental hygiene diagnosis and care plan, implementation, outcome evaluation and communications between professionals, patient, and all people in the circle of care.

**Discipline-specific Competencies—Dental Laboratory Technology**

The dental laboratory technology competencies are the continuation of the allied dental core competencies and both should be viewed as a single framework for this discipline. Dental laboratory technicians fabricate custom dental prostheses and appliances and provide services according to the dentist’s prescription. They practice in collaboration with health care and other professionals in various settings. Dental laboratory technicians may become nationally certified but have no licensing requirements.

**DLT. 1 Essential Knowledge**

DLT. 1.1 General Knowledge
- Communication
- Mathematics
- Business principles

DLT 1.2 Physical Sciences
- Anatomy and physiology
- Chemistry
- Biology
- Physics

DLT 1.3 Dental Sciences
- Head, neck and oral anatomy and physiology
- Tooth morphology
- Occlusion
- Dental lab material types, properties and handling

DLT 1.4 Dental Laboratory Fundamental Knowledge of Materials, Equipment and Techniques in
- Complete dentures
- Removable partial dentures
- Fixed prosthodontics
- Orthodontics
- Implants
- Other dental appliances improving patient’s health and well-being

**DLT. 2 Best Practices**

2.1 Assessment
DLT. 2.1.1 Ensure adequate information and the dentist’s prescription are supplied for case assessment.
DLT. 2.1.2 Evaluate and establish design and fabrication methods customized for each patient.

2.2 Planning
DLT. 2.2.1 Apply foundational knowledge to all aspects of dental laboratory practices.
DLT. 2.2.2 Determine the advantages and disadvantages of materials, equipment and processes necessary to fabricate custom dental prostheses and appliances.

2.3 Fabrication
DLT. 2.3.1 Use evidence-based analysis to apply emerging technologies, innovative materials and manufacturing methods to improve the quality of products and services.
DLT. 2.3.2 Design and fabricate custom dental prostheses and appliances.
DLT. 2.3.3 Perform repairs and alterations.
2.4 Evaluation
DLT. 2.4.1 Provide quality assurance and maintain quality control.
DLT. 2.4.2 Evaluate and reflect on the effectiveness of completed services.
DLT. 2.4.3 Implement improvements.

2.5 Business Practices
DLT. 2.5.1 Apply management and marketing strategies relative to the dental laboratory practices.
DLT. 2.5.2 Document and maintain case information.
DLT. 2.5.3 Demonstrate efficient handling, storage and delivery of dental prostheses and appliances.
Resolution 8H-2023

Provisional Membership of the Northeast Ohio Medical University Bitonte College of Dentistry

The Northeast Ohio Medical University Bitonte College of Dentistry has submitted an application for an ADEA Provisional Membership.

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 should 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 July 1 following House approval.

The Northeast Ohio Medical University Bitonte College of Dentistry has made an application for ADEA Provisional Membership in writing and meets the criteria for Provisional Membership.

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

8H-2023 Resolved, the ADEA House of Delegates accepts the Northeast Ohio Medical University Bitonte College of Dentistry application for Provisional Membership in ADEA, effective July 1, 2023.
Resolution 9H-2023
Provisional Membership of the
Pacific Northwest University of Health Sciences College of Dental Medicine

Pacific Northwest University of Health Sciences College of Dental Medicine has submitted an application for an ADEA Provisional Membership.

Provisional Membership of the
Pacific Northwest University of Health Sciences College 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 should 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 July 1 following House approval.

The Pacific Northwest University of Health Sciences College of Dental Medicine has made an application for ADEA Provisional Membership in writing and meets the criteria for Provisional Membership.

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

9H-2023 Resolved, that the ADEA House of Delegates accepts the Pacific Northwest University of Health Sciences College of Dental Medicine’s application for Provisional Membership in ADEA, effective July 1, 2023.
Resolution 10H-2023

Provisional Membership of the Universidad Ana G. Méndez School of Dental Medicine

The Universidad Ana G. Méndez School of Dental Medicine has submitted an application for an ADEA Provisional Membership.

Provisional Membership of the Universidad Ana G. Méndez 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 should 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 July 1 following House approval.

The Universidad Ana G. Méndez School of Dental Medicine has made an application for ADEA Provisional Membership in writing and meets the criteria for Provisional Membership.

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

10H-2023 Resolved, that the ADEA House of Delegates accepts the Universidad Ana G. Méndez School of Dental Medicine’s application for Provisional Membership in ADEA, effective July 1, 2023.
The University of Pikeville College of Dental Health has submitted an application for an ADEA Provisional Membership.

Provisional Membership of the University of Pikeville College of Dental Health

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 should 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 July 1 following House approval.

The University of Pikeville College of Dental Health has made an application for ADEA Provisional Membership in writing and meets the criteria for Provisional Membership.

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

11H-2023 Resolved, that the ADEA House of Delegates accepts the University of Pikeville College of Dental Health’s application for Provisional Membership in ADEA, effective July 1, 2023.
New Chief Administrators at Member Institutions

New Dental School Deans

Since the 2022 ADEA Annual Session & Exhibition, U.S. and Canadian academic dental institutions have appointed the following new deans, interim deans, acting deans and directors, whose service began between the end of the 2022 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. Nancy Young, Dental College of Georgia at August University
- Dr. Thomas Yoon, Lake Erie College of Osteopathic Medicine School of Dental Medicine
- Dr. Agelo Mariotti, Louisiana State University Health New Orleans School of Dentistry
- Dr. Sheri Brownstein, Midwestern University College of Dental Medicine-Arizona
- Dr. Noel Aymat, Ponce Health Sciences University School of Dental Medicine
- Dr. Saulius Drukteinis, Southern Illinois University School of Dental Medicine
- Col. David Issac Tucker, U.S. Army Dental Corps
- Dr. Paul Major, University of Alberta Faculty of Dentistry
- Dr. Susan Rowan, University of Illinois Chicago College of Dentistry
- Dr. Jan Hu, University of Michigan School of Dentistry
- Dr. Rowen Zetterman, University of Nebraska Medical Center College of Dentistry
- Dr. James Mah, University of Nevada, Las Vegas, School of Dental Medicine
- Dr. Marnie Oakley, University of Pittsburgh School of Dental Medicine
- Dr. Andre Ritter, University of Washington School of Dentistry
- Dr. Lyon Cooper, Virginia Commonwealth University School of Dentistry
- Dr. Elizabeth Andrews, Western University of Health Sciences College of Dental Medicine

New Affiliate Members

Since February 2022, these programs and schools have become Affiliate Members. The ADEA Board of Directors welcomes them.

Allied Dental Members

- South Puget Sound Community College, Prof. Laura Moe-Genter, Dental Assisting Program Director (Tumwater, WA)
- Southern Ontario Dental College, Prof. Nancy Campbell-Mione, Dental Hygiene Program Director (Ancaster, ON)
- MedQuest, Prof. Jamie Ely, Dental Hygiene Program Director (Louisville, KY)
- Lane Community College, Prof. Michelle Cummins, Dental Hygiene Program Director (Eugene, OR)
- Rio Salado College, Prof. Monica Williamson Nenad, Dental Hygiene Program Director (Tempe, AZ)
- Iowa Western Community College, Dr. Andrea Huckabee, Associate Dean of Health (Council Bluffs, IA)
- Lancaster County Career and Technology Center, Prof. Donna Maslin, Dental Hygiene Program Director (Willow Street, PA)
Other New Administrators at Member Institutions

We have been notified of the following new administrators at member institutions and programs:

- Dr. Maysa Oubaidin, Associate Director of Post Graduate Orthodontics, University of Illinois Chicago College of Dentistry
- Dr. Rajesh Khanna, Director of the NYU Pain Research Center, NYU College of Dentistry
- Dr. Eleanor Fleming, Assistant Dean for Equity, Diversity, and Inclusion, University of Maryland School of Dentistry
- Dr. Laurie McCauley, Provost, University of Michigan
- Dr. Manish Valiathan, Associate Dean for Clinical Affairs, Case Western Reserve University School of Dental Medicine
- Dr. Kristin Williams, Associate Dean for Admissions and Student Affairs, Case Western Reserve University School of Dental Medicine
- Dr. Suchitra Nelson, Associate Dean for Clinical and Translational Research, Case Western Reserve University School of Dental Medicine
- Dr. Andres Pinto, Associate Dean for Graduate Studies, Case Western Reserve University School of Dental Medicine
- Dr. Mathew Bateman, Assistant Provost, Lake Erie College of Osteopathic Medicine School of Dental Medicine
- Dr. Wei-Shao Lin, Chair, Department of Prosthodontics, Indiana University School of Dentistry
- Dr. Amjad Javed, Associate Dean for Research, University of Alabama at Birmingham School of Dental Medicine
- Dr. David Lam, Associate Dean for Medical Integration, University of the Pacific, Arthur A. Dugoni School of Dentistry
- Dr. Catherine Hayes, Program Director of Dental Public Health, Harvard School of Dental Medicine
- Ms. Marion Manski, Director, Dental Hygiene Program, Virginia Commonwealth University School of Dentistry

Corporate Members

These companies have become ADEA Corporate Members since February 2022. The ADEA Board of Directors welcomes them.

- KaVo Dental Technologies, Ms. Christine Hart, Strategic Account Manager (Charlotte, NC)
- Smile Brands, Inc., Ms. Colleen Bixler, University Relations Manager (Irvine, CA)
- Curaden, USA, Ms. Shannon Nanne, Manager, Professional Relations and Education (Mesa, AZ)
- Elevate Oral Care, Mrs. Brooke Crouch, Professional Education Specialist (West Palm Beach, FL)
- Dental Mastery, Mr. Adam Keune, Founder/Chief Growth Officer (Coralville, IA)
- Young Innovations, Ms. Wendy Bebey, Academic Relations Manager (Simsbury, CT)
- Overjet, Dr. Mina Ghorbanifarajzade, Clinical Manager (Miami, FL)

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.

**A. T. Still University-Arizona**
Dr. L. James Bell
Dr. Irvin Silverstein

**A. T. Still University-Missouri**
Dr. Lawrence W. Doerr

**Boston University**
Dr. Justin Altshuler
Dr. Harold E. Goodis

**Case Western Reserve University**
Ms. Glady Ina
Dr. William Rose
Ms. Jackie Roulette
Dr. Bernard Tandler

**Creighton University**
Dr. Neil S. Norton

**Eastman Institute for Oral Health at the University of Rochester**
Dr. Leonard "Len" Fishman
Dr. William McHugh

**Harvard University**
Dr. Israel Leon Dogon
Dr. Doris Norris
Dr. Mercedes Paz

**Medical University of South Carolina**
Dr. Richard DeChamplain
Dr. Nancy Grant
Dr. Allen Rasheed
Dr. Pete Whitbeck

**New York Medical College**
Dr. Joshua Lilly

**New York University**
Howard Krigsman
Deborah Morris
Andrew Schenkel
Herbert Westrich

**Oregon Health and Science University**
Dr. Martin Arrigotti
Dr. Devin Mikael Brice
Dr. Orville Boyle
Dr. Alan Carter
Dr. Jack Clinton
Dr. Rita Crislis-Seja
Dr. George Cross
Dr. Bruce Dingler
Dr. Willard Douglas Dryden
Dr. William Dugan
Dr. Jacob Geller
Mary Ann Haisch
Dr. Gary Heen
Dr. Douglas Kimball
Dr. James Martin
Dr. David McMorine
Dr. Joseph Megale
Dr. Jack Paris
Dr. Christian Speilberg
Dr. Evelyn Strange
Dr. Robert Swanberg
Dr. James Tallman
Dr. Louis Terkla
Dr. Shauna Ann Thoreson
Angela Valles
Dr. Gordon Wiltshire
Dr. Lisa Beth Wipf

**Rutgers, The State University of New Jersey**
Dr. Gaetano Spinnato

**Texas A&M University**
Dr. David G. Genecov
Dr. George A. Harvey
Dr. John Franklin Nelson
Dr. Daniel E. Waite
Dr. Claude R. Williams, Sr.

**The Ohio State University**
Dr. Allen Firestone
Dr. Rudy C. Melfi
Ms. Davidina Rea

**University at Buffalo**
Mary Carr
Dr. Davis Garlapo
Dr. Leonard Gross  
Dr. Elizabeth Hatton  
Dr. Edward Monaco  
Dr. Mindy Paticoff-Weinman  

Univesité de Montréal  
Dr. Leonardo Abelardo  
Dr. Guy Boyer  
Dr. Claude Lamarche  

University of British Columbia  
Dr. Kwesi Baffoe  
Dr. William (Bill) Hadaway  
Dr. David Kennedy  
Dr. Terry Kline  
Dr. Alnoor Somji  

University of Alabama at Birmingham  
Dr. John B. Ballard  
Dr. Frank L. Holt  
Dr. Karl F. Leinfelder  
Dr. Perng-Ru Liu  
Dr. Richard Allen Weems  

University of Detroit Mercy  
Dr. Michelle Wheater  

University of Florida  
Dr. Robert Ford  
Dr. Wallace Mealia, Jr.  
Dr. Maxwell "Max" Nolen Rudie  
Dr. Frank Vertucci  

University of Kentucky  
Dr. Douglas Durbin  
Dr. Roger Ewing  
Dr. Jason Johnston  
Dr. Robert Morris  
Dr. Milton Skeeters  
Dr. Scott Smith  

University of Louisville  
Mr. Louis Bauer  
Dr. Beth A. Bennett  
Dr. Ronald G. Crume  
Dr. Steven Earl Harris  
Dr. Alan G. Hastings  
Dr. George Rodney Heath  
Dr. Harold R. Howard  
Dr. Roy D. Johnson  
Dr. Doris A. Jones  
Dr. Willard E. Lane  

Dr. Lou Leslie  
Dr. Ivan D. Marks  
Dr. Claude Durfee Marshall  
Dr. Elisa Pape Millett  
Dr. John David "JD" Moore  
Dr. James 'J.D.' Outland  
Dr. Michael L. Sala  
Cynthia Robinson Schinagle, RDH  
Dr. Tom Sleamaker  
Dr. David Tasman  
Dr. James R. Taylor  
Dr. David N. Waugh  
Dr. James D. White  
Dr. Philip Whiteside, Jr.  
Dr. William B. Worthington  

University of Michigan  
Dr. Sondra Gunn  
Dr. William J. O'Brien  
Joan (McGowan) Schmerl  
Susan Seger  
Dr. Philip Warren  

University of Nebraska Medical Center  
Dr. Charles Anderson  
Dr. David Brown  
Dr. John Lott  

University of Nevada, Las Vegas  
Dr. Steven Hayes  

University of New England  
Kattia Maria Lomando  
Rose Morris  
Dr. Charles Selene  

University of North Carolina at Chapel Hill  
Dr. Eli John Attyeck  
Dr. Wayne Page Atkisson  
Dr. Charles Tate Byerly Jr.  
Dr. Jerry Lewis Butler  
Dr. Numa Watt Cobb Jr.  
Dr. Angela Chavis-Mickey  
Dr. Clifton Earl Crandell Sr.  
Dr. William Michael Crouch  
Dr. Lee Corbitt Currin  
Dr. John Raymond Dunn  
Dr. George William Greco  
Dr. Morris Hal Griffin  
Dr. Bruce Albert Gustafson  
Dr. Andrew Jackson Harrell III  
Dr. Charles Jay Harris Jr.
Ms. Margaret Nelson Hillock
Dr. Robert Waide Holmes Jr.
Dr. Barrett McKenzie Hunter
Dr. Jerry O’Dell Jernigan
Dr. Thomas W. Kelly Jr.
Dr. Karl F. Leinfelder
Dr. David Theon Marshburn
Dr. Frank Webb McCracken III
Dr. Ronnie Rich Milligan Sr.
Ms. Jane Brock Neal
Dr. Kenneth Holmes Oakley Jr.
Ms. Jamene Hunter Partin
Dr. Henry Wayne Ridout
Dr. Ledyard Elree Ross Jr.
Dr. Maxwell Nolen Rudie
Dr. William Clem Satterfield
Ms. Joyce Elizabeth Sigmon
Ms. Marcia LaBudde Smith
Dr. Hugh Edward Sutphin
Dr. Harvey Kay Thompson
Dr. Harold Winfred Twisdale Sr.
Dr. Steve Michael Walsh
Dr. Matthew Thomas Wood

University of Washington
Dr. Gary J. Arnold
Dr. James S. Brudvik
Ms. Dalila V. Sebrin
Dr. John D. Townsend
Dr. Philip Worthington

University of the Pacific
Dr. Harry H. Hatasaka
Dr. Dennis M. Kalebjian

UTHHealth Houston
Dr. Richard Alexander
Dr. James Barnes III
Dr. Jack Burroughs
Dr. James Fairleigh III
Ms. Helen Flores
Dr. John Gerloff
Dr. William Glenn, Jr.
Dr. Richard McFarland
Dr. Gerald McGown
Dr. Donald Morse
Dr. Jeffrey Nieland
Dr. Billy Powell, Jr.
Dr. Blake Sinclair
Dr. Samuel Topek
Dr. Roger Weed

University of Pittsburgh
Dr. James Guggenheimer

University of Tennessee Health Science Center
Dr. Robert Clayton
Dr. Bruce Hamilton
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 establish branch offices of the Association or change the location of the ADEA Headquarters;
      g) To elect the Chair-elect of the Board of Directors of the Association;
      h) To elect nominees for representation in other organizations when so requested; and
      i) 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 is represented by all of its members;
   3. The Council of Faculties is represented by all of its members from Institutional and Provisional Member institutions and one member elected from the members from the Canadian Faculties of Dentistry;
   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; a minimum number is not required in the event that there are less than 10 programs in a particular category.
5. The Council of Advanced Education Programs (COAEP) is represented in the ADEA House of Delegates 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 COAEP member programs. COAEP shall have at least 16 Delegates. Delegates do not need to be a current Program Director or Chief of a Hospital Dental Service.

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 its Administrative Board; by 12 members of the Council of Students, Residents and Fellows (one each from each of the 12 districts recognized by the Council); by four advanced dental students, residents or fellows and by six allied dental students.

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 from Institutional and Provisional Member Institutions serve as Delegates to the House of Delegates. One member as elected by the members from the Canadian Faculties of Dentistry also serves as a Delegate 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 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.

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**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 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. 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. 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. 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.

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.

3. **INSTALLATION.** Elected Association Officers are installed at the ADEA Annual Session & Exhibition on the floor at the Closing Session of the House of Delegates.

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. To approve the Association’s operating budget;
9. For each ADEA Annual Session & Exhibition, to prepare and submit an annual operating budget for the following fiscal year allowing feedback from the House of Delegates prior to final approval by the ADEA Board of Directors;
11. 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.
D. **Limited Proxy Use.**

A Board Director who is unable to attend a Board of Directors meeting may designate one of the other elected Council Officers to attend in his or her place as a non-voting member of the Board of Directors for that meeting.

**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.
   - International dental schools not located in the United States or Canada accredited by the Commission on Dental Accreditation.
   - 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:
     - 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
     - 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. For-profit corporations and not-for-profit corporations and organizations may be considered for membership as a Corporate Member.
3. 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 immediately upon approval by the Board of Directors. Corporate Memberships are reviewed annually.
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 in order to set the priorities for and conduct business of the Council.

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, which receives and considers nominations and recommends eligible candidates to stand for election 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 serve as the nominating committee in order to receive and consider nominations from the membership and recommend eligible candidates 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 serve as the nominating committee in order to receive and consider nominations from the membership and recommend eligible candidates for the positions of Secretary, Vice-Chair, Chair and Board Director. Members-at-Large are chosen by the Council of Students, Residents and Fellows’ Administrative Board. Additional nominations may be made from the floor at a Council’s ADEA Annual Session & Exhibition meetings when the nominating committee does not receive any nominations via the Call for Nominations process. An individual’s eligibility for the open position will be reviewed and vetted by the nominating committee.

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, or the presiding officer as designated. 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, 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 Annual Session & Exhibition and be ratified during a meeting of the appropriate Council prior to participating in the Opening or Closing of the House of Delegates. At this meeting, a Council may choose to waive the notification of an additional meeting to approve alternate delegates that are identified after the initial meeting and prior to the alternate delegates’ participation in either the Opening or Closing of the House of Delegates, provided that the newly identified alternate delegates are qualified and have been vetted by the appropriate Council Administrative Board.

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.
d) 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 voting 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 and one faculty member from each one of the Canadian Faculties of Dentistry, 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 Advanced Education Programs membership includes Program Directors or Chiefs of a Hospital Dental Service (as defined by CODA’s list of Program Directors), faculty, residents and fellows, as well as advanced dental education administrators, in Commission on Dental Accreditation-accredited advanced dental education programs located in ADEA-member institutions, as well as past members of the COAEP Administrative Board who are appointed to or employed in an ADEA member institution.

Eligibility to vote on Council business or to vote for candidates nominated for either the Council’s Administrative Board or for the Council’s Board Director is limited to one vote per advanced education program. Only Program Directors or Chiefs of a Hospital Dental Service, or their designee, and Administrative Board members may vote during Council meetings on Council business. The quorum requirement for the transaction for any Council business, including the election of the Member-at-Large and Board Director positions, is one-tenth of the total voting membership of the Council.

To be eligible to serve as member of the COAEP Administrative Board, a person must:
1. Be an individual member of ADEA;
2. Be a member of ADEA COAEP;
3. Be Chief of a Hospital Dental Service or Program Director of a CODA-accredited advanced dental education program located in an ADEA-member institution at the time of the election. Administrative board members may continue to serve in
their roles on the board for the duration of their terms as long as they remain in an academic position in a CODA-accredited dental education program located in an ADEA member institution.

To be eligible to serve as a COAEP Board Director, a person must:
1. Be an individual member of ADEA;
2. Be a member of ADEA COAEP;
3. Be appointed to or employed in an ADEA Member Institution;
4. Be involved in advanced dental education at their institution;
5. Be a current or former Program Director or Chief of a Hospital Dental Service; and
6. Have previously been elected to and served on the Council’s Administrative Board.

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 one voting representative of each for-profit Corporate Member company/organization and one voting representative from the total number of not-for-profit Corporate Members. The not-for-profit Corporate Members shall nominate and elect their one voting representative. All not-for-profit Corporate Member companies/organizations may join the meetings of the Corporate Council but are represented by the one voting member. The not-for-profit Corporate Council representative may not hold office in the Council. The Corporate Council has five officers: Chair, Chair-elect, Secretary, Member-at-Large and Board Director (ex officio). An individual must be the owner or an employee of a Corporate Member to be eligible as a representative to the Corporate Council. 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 those members who attend a meeting at which an election occurs.
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.
   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 and the Council of Sections Staff Liaison no later than the designated deadline date.

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.

D. Review.

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:
1. The Administrative Board may impose corrective actions, including probation, for those Sections that fail to submit annual reports or perform prescribed functions.
2. 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.
   a) The Council of Sections Administrative Board forwards a recommendation that a Section be disbanded or merged to the Board of Directors.
   b) 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 Annual Session & Exhibition.
   c) Only the House of Delegates has the authority to disband a Section or merge Sections.

E. Officer and Term of Office.
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.

1. Qualifications: 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.

2. Duties:
   a) 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 Annual Session & Exhibition; assist in planning, implementing, and assessing Section programs and projects; prepare and submit the Section annual report after each Annual Session & Exhibition to the Council of Sections Staff Liaison; and serve as Section liaison with the Council of Sections Administrative Board.
   b) It is the duty of the Chair to provide leadership in the coordination of Section activities; attend the 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 Annual Session & Exhibition.
   c) 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 interim meetings of the Council of Sections; perform any Section-related duties requested by the Chair; serve as Chair of the Nominating Committee, which receives and considers nominations and recommends eligible candidates to stand for election for Section office; and serve as the Program Chair for the Section and be responsible for submitting program proposals on behalf of the Section.
   d) It is the duty of the Secretary to record the minutes of Section meetings and disseminate them to the Section membership; attend the Annual Session & Exhibition and interim 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.

3. 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.
4. **Nominations:** Before each ADEA Annual Session & Exhibition, the Nominating Committee (Chair-elect and two Section members who are not Officers) recommends eligible candidates for the office of Secretary. Every third year, the Committee recommends eligible candidates for the office of Councilor. Additional nominations for these offices may be made from the floor at the Section business meeting during the Annual Session & Exhibition when the nominating committee does not receive any nominations via the Call for Nominations process. An individual’s eligibility for the open position will be reviewed and vetted by the nominating committee.

5. **Election:** Section Officers are elected at the Section Members’ Forum held at the Annual Session & Exhibition. The method of voting is left to the discretion of the Chairs or presiding officer. Sections that hold meetings at other times during the year, in which a majority of their members attend, may elect their officers at those meetings with installation of the new officers at the conclusion of the ADEA Annual Session & Exhibition following the mid-year meeting of a section.

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

7. **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.

8. **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) receives and considers nominations and recommends eligible candidates to stand for election for the SIG office. 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 ADEA Board of Directors;

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.

D. Nondiscrimination Policy.

ADEA’s Councils, Sections, Boards, the House of Delegates, committees, task forces, and similar entities do not discriminate on the basis of race, color, national or ethnic origin, ancestry, age, religion or religious creed, disability or handicap, sex or gender, gender identity and/or expression, sexual orientation, military or veteran status, genetic information, or any other characteristic as prohibited under applicable federal, state or local law.

Revised June 2022
ADDENDUM
Approval of the Fiscal Year 2024 (FY2024) Budget
Approval of the Fiscal Year 2024 (FY2024) Budget

In addition to the following overview, the Board of Directors should refer to Exhibits 1-2024 and 2-2024 below. Exhibit 1-2024 shows revenue for fiscal years 2020 through 2024 and Exhibit 2-2024 shows expenses for the same years. The ADEA fiscal year runs from July 1 through June 30.

The Finance Committee has reviewed and approved the attached budget and recommends the ADEA Board of Directors approve the following resolution:

Resolved, that the ADEA Board of Directors approves the ADEA Fiscal Year 2024 (July 1, 2023 through June 30, 2024) operating budget.
Overview of the Fiscal Year 2024 Budget for American Dental Education Association

PROPOSED FISCAL YEAR 2024 (FY2024) BUDGET
Prepared for the ADEA Finance Committee and ADEA Board of Directors
March 6, 2023

The proposed FY2024 (July 1, 2023–June 30, 2024) Association budget was developed through a collaborative process involving ADEA staff. Based on these discussions among staff and leadership, the proposed FY2024 budget focuses on ADEA’s Strategic Framework as well as striving for overall cost efficiencies. As much as possible, the budget projections are based on historical information from FY2019 through FY2023 and on priorities for the coming fiscal year.

In addition, this budget includes over $1,700,000 in non-recurring costs to enhance our organizational capabilities including a new research data lake and an association management system. All these non-recurring costs will allow ADEA to improve our services to the membership or are for programs that benefit the membership directly. These project funds were initially approved as part of a multi-year plan included in the FY2022 budget.

ADEA is budgeting for a balanced budget by using a portion of previously accumulated net assets.

The statements (Exhibits 1-2024 and 2-2024) accompanying this overview include the following comparative data:
- Actual revenue and expenses for FY2020, FY2021 and FY2022.
- The ADEA Board of Directors approved budget for FY2023.
- The proposed budget for FY2024.

REVENUE

The proposed total budgeted revenue for the Association in FY2024 is $32,733,328. Revenue for FY2024 includes nearly $1.8 million in previously approved spending of non-recurring pandemic related assistance and the use of $1,900,000 in accumulated net assets.

At the beginning of the pandemic, ADEA made the decision to immediately decrease member dues by 10% for 2 years, which resulted in a decrease of over $425,000 over a two-year period and was a direct benefit to our member schools, corporate sponsors and individual members. These dues were increased back to FY2020 levels in FY2023 and FY2024. Member dues have not been raised in nearly 2 decades.

For FY2024, we will not be in increasing the application fees for applicants The Fee Assistance Program is budgeted at $225,000 which is a direct benefit to our student applicants.

Overall Application Fees will be consistent with the FY2023 budget. We saw small decreases from the previous cycle but submitted applications and designations are consistent with a 5-year moving average. For FY2024, we budgeted a slight revenue increase from prior years, but assumed a 3% decrease in applications and designations from FY2022 levels. The increase of $160,000 reflects small increases in submitted applicants and designations from FY2023 budgeted levels but is less than FY2023 actual figures.
The other significant sources of revenue for ADEA include Publications, Advertising, Grants, Sponsorships and Meetings Registrations. Registrations, sponsorships, and exhibitor income are projected to increase from prior years as we recover from the pandemic related loss of income.

Our meetings are budgeted to be in person, and this can be seen in the cost of meetings and travel line items.

Our investments are performing better in FY2023 than they did in FY2022, but the markets remain volatile. Investment revenue is not included in ADEA proposed operating budgets for FY2024.

**Membership Dues ($2,425,959)**

Modest changes in total dollars by category are driven by increases or decreases in the number of members in each category based on staff estimates for FY2024.

**Active**
Revenue from Active Member dues is budgeted at $1,914,150 and is based on 73 U.S. dental schools and 2 provisional schools.

**Affiliate**
Revenue from Affiliate Member dues is budgeted at $200,600 and based on the current affiliate institutional membership of 10 Canadian dental schools, allied members, hospital-based members at four advanced education non-hospital members, and 4 federal members.

**Corporate**
The proposed total budgeted dues revenue of $256,499 in this category is based on 57 Corporate Members. We are being conservative in this area as the industry is also subject to the uncertainties in the economy.

**Individual**
Proposed total budgeted dues revenue of $35,750 in this category is based on the current individual and retirees.

**Student**
A modest amount of revenue of $18,960 from 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 student members paying $36 each.

**Publications and Advertising Revenue ($540,000)**
The proposed budget of $70,000 for publications for FY2024 shows a decrease in revenue from the FY2023 budgeted revenue of $85,000. This is based upon the demand that we have been seeing in this area for the *ADEA Official Guide to Dental Schools*.

**Journal of Dental Education (JDE) Subscriptions**
The proposed JDE subscription sales budget reflects the royalties for outsourcing the JDE to Wiley as of January 1, 2021. Royalty income is expected to be $70,000 in FY2024.

**Advertising and web sales**
The proposed FY2024 budget is $400,000. We have rolled up all our advertising and web-based pay per view articles into one category to allow us to focus more directly on all these areas on a coordinated fashion.
Application Fees ($22,664,369)
Revenue from application fees for all ADEA’s centralized application services showed significant increases from pre-pandemic levels. The last two application cycles have seen increases in submitted applications and school designations. Our projections for FY2024 remained flat from the FY2023 budget. We held fees flat for the 2021 and 2022 cycles and now the 2023-2024 cycle.

ADEA AADSAS (ADEA Associated American Dental Schools Application Service)
Revenue for ADEA AADSAS, projected at $12,926,210, is based on 10,593 applicants with 8.5 designations each. This is 3% less than the 2023 cycle actual results. The initial fee for the application remained at $264 and $115 for each designation.

The ADEA AADSAS Fee Reduction Program budget of $225,000 for FY2024 is consistent with pre-pandemic levels. The purpose of this allowance is to provide reduced application fees for those applicants with demonstrated financial constraints.

ADEA CAAPID (ADEA Centralized Application for Advanced Placement for International Dentists)
Projected revenue for ADEA CAAPID is $2,499,189. This figure is based on a projected 2,443 applicants selecting an average of 6.6 designations. This is a 3% decrease from the 2023 cycle actual results. The initial fee for the application remained at $264 and $115 for each designation.

ADEA PASS (ADEA Postdoctoral Application Support Service)
Projected revenue for ADEA PASS is $7,153,470 based on 5,490 applicants which is a 6% decrease form the 2023 cycle. The number of designations is projected to drop by 3% this cycle. The initial fee for the application remained at $199 and $92 for each designation.

ADEA DHCAS (ADEA Dental Hygiene Centralized Application Service)
This centralized application service for dental hygiene programs launched in August 2013. The projected revenue for ADEA DHCAS is $85,500 based on 1,800 applicants. There was no increase in the applicant fees, and they remained at $50 for each submitted application and $35 for each designation.

Grants & Contributions ($117,000) – We anticipate that we will receive $117,000 in grants to support the SHPEP program.

Foundation and Grant Support
Budgeted support of $117,000 is based on anticipated continued support from the Robert Wood Johnson Foundation for the Association of American Medical Colleges/ADEA Summer Health Professions Education Program. We are not planning for a Gies Gala at the 2024 Annual Session.

Meetings Registration and Exhibits Revenue ($3,207,173)
Association meetings overall have been budgeted for FY2024 based on the ADEA Board of Directors’ goal of financial neutrality while considering specific subsidies as approved by the Board of Directors.

Revenue from registration fees and exhibitor fees for FY2024 ADEA meetings are based on historical data and trends from the previous meetings. Revenue in all categories for the annual session are expected to increase from past years as the attendance at meetings normalizes. Exhibit fees are expected to increase to $326,887 in FY2024 which is consistent with FY2023.
**Sponsor Fees**

Budgeted at $704,000, this figure includes sponsorship of various conferences and programs for members and partners throughout the year. These figures are based on discussions with our corporate sponsors. These sponsorships include $90,000 for the International Women’s Leaders Conference. Sponsor fees appear to be normalizing.

All meetings for FY2024 are budgeted to be in-person.

**Investment and Other Income ($100,000)**

Investment income from ADEA's cash reserves and operating accounts are budgeted at $100,000 in FY2024 and will be offset for operating budget purposes by investment fees. Any additional income from our investments is not included in the operating budget. In addition, we are budgeting to spend $100,000 of Gies Net Assets on building the Gies Foundation as the grant giving arm of ADEA.

**Use of accumulated Net Assets. ($1,912,016) and Special Project Funds ($1,787,160)**

At the end of FY2022, ADEA and ADEA Gies Foundation had $31,491,588 in net assets. In the FY2023 budget, the Board authorized $1,912,000 in accumulated net assets to help fund needed multi-year projects. We are expecting that FY2023 will end in a surplus position. Thus, the funds authorized for FY2023 will not be used. Management is proposing that these funds be carried over into FY2024 along with previously approved special project funds of $1,787,160.

**EXPENSES**

Total expenses recommended in the proposed FY2024 budget are $32,733,328. The expenses in the FY2024 budget include $1,787,160 in non-recurring costs to enhance our technological capabilities including an association management system and other projects that are consistent with our strategic initiatives. All these costs will allow ADEA to improve our services to the membership or are for programs that benefit the membership directly.

**Personnel Costs and Fees**

Total Personnel Costs and Fees are projected at $16,023,000 in the proposed FY2024 budget. This is $756,000 more than the FY2023 budget. Our consulting fees are $250,000 lower than FY2023. These consulting fees are lower as we spent a portion in FY2023 on the projects approved in the FY2022 budget.

The total number of staff is budgeted at 76 staff, consistent with FY2023. Salary expenses are budgeted to be higher in FY2024 by $823,000. Recall that we adjusted salaries in June 2022 to be more competitive with the market, a process we undertake every 3 – 4 years. We were also faced with market pressures brought on by the dramatic increase in inflation over the last 24 months. It is important that we adjust our staff compensation in order to remain competitive in hiring and ensuring that the staff remains intact in this challenging environment. We feel our compensation is now consistent with the market.

We are also proposing to add two mid-level positions, one each in the Office of Learning and the Office of Policy and Education Research. Other recurring operating costs were reduced and repurposed to allow us to fund these positions.
**Temporary Help**
Expenses for temporary staff are budgeted at $124,900 based on projections for FY2024. The use of temporary help is limited to vacancies and seasonal help.

**Payroll Taxes and Other Benefits**
Payroll taxes and benefits are budgeted at 26% of salaries. This is in line with the past, where taxes and benefits ranged from 20–24% of salaries. These costs are slightly higher due to a decrease in number of projected staff vacancies.

**Legal Fees**
Legal fees of $125,000 are based on historical experience and projections of required services in FY2024, including the participation agreements with the member schools.

**Consultants, Honoraria and Stipends**
This expense is budgeted at $3,378,893. The proposed Consultants and Honoraria budget includes support for a variety of services, such as for editorial and production services, as well as consultants for ADEA’s website initiatives. These costs include funds available to the CEO to hire consultants to help with overflow work that may develop.

**Travel**
Travel is budgeted at $1,118,611. Travel costs are significantly higher as all travel returns to pre-pandemic levels and is a significant expense in this budget for the fiscal year.

**Other Costs**

**Bank and Credit Card Charges**
The budgeted expense of $373,946 for credit card processing fees for FY2024 is based on projected revenue for FY2024 and industry fee structure. Credit card processing fees stayed even for FY2024 and are related to the centralized application services.

**Developmental Programming and Data Processing**
The combined budgeted expense for both categories is approximately $6,696,500 compared with $6,602,538 in the FY2023 budget. This slight increase compared to the FY2023 budget is due to the increase in the number of transactions in the centralized application services.

**Computer Operations**
The budgeted expense of $866,886 reflects ADEA’s continuing investment in technology. IT is essentially flat when compared to FY2023. While these costs have increased over the last few years, the increases have been partially offset by cost reductions in other areas. We anticipate this area will continue to require future investments to keep up with a rapidly changing technological environment and to take advantage of the improvements in data collection and analysis. This is consistent with our Strategic Framework, especially as it relates to the gathering and use of data in our work. Previous investments in this area proved invaluable during the pandemic when we were forced to work remotely.
Telephone/Internet
The budgeted expense of $163,418 reflects a change in the grouping of expenses as part of our changes in the accounting system and future reporting. It covers the office phones as well as phone and internet at our meetings. Our phone system is being upgraded to be integrated with Microsoft Teams as part of our plans to be in a remote/hybrid work environment. This technology supports that change.

Postage/Freight
The budgeted expense of $88,775 is consistent with prior years. This category covers organizational mailings, including all publication and membership materials. It also covers shipping expenses for ADEA’s meeting materials, including to and from the ADEA Annual Session & Exhibition.

Office Supplies
The budget for FY2024 in this category is $58,850. These costs have decreased over the years as ADEA has increased investments in technology, allowing enhanced efficiency and productivity. Costs are higher this year as we prepare to transition to a remote/hybrid work environment.

Printing/Reproduction
The $120,810 budgeted expense for both categories is based on the estimated printing costs for meeting materials and publications. 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 Snapshot of Dental Education, ADEA Official Guide to Dental Schools, and other documents such as the ADEA House of Delegates manual.

Rent/Refurbishing
The budgeted expense of $1,957,000 reflects the annual escalation costs in the lease offset by amortization of rent abatement and construction costs. Our office lease expires in the 4th quarter of 2025, and we will begin to consider our options during FY2024 as more information becomes available in terms of workforce management.

Depreciation/Amortization
These are noncash expenses and the combined budgeted expense for both categories are $360,000. This is due to the increased amortization for the leasehold improvements that were made to the new space being spread over the 10-year life of the lease and investments in information technology and audio-visual equipment in the new meeting space.

Equipment Rental
This line item is for equipment rental for items such as copiers and postage machines. The budgeted expense for FY2024 is $47,820 and maintenance of some of the equipment is included in the lease cost. This budget also reflects a refinement in the budgeting process to allow us to track meeting expenses better in the future.

Repairs and Maintenance
This line item is for repairs and maintenance of equipment throughout the organization. The budgeted expense for FY2024 is $2,500.

Insurance
This line item is for Corporate Liability insurance, Directors and Officers Liability insurance and Cybersecurity insurance to protect the organization considering the large number of individual financial transactions that occur through ADEA’s application services. The budget for FY2024 is $180,000.
**Dues/Subscriptions/Membership Fees**
For FY2024, we have budgeted $258,695. As a professional association with many partners and allies, ADEA is most successful working together toward common goals.

**Employee Recruitment and Retention**
Total employee professional development expenses have been budgeted at $38,430. We are spending additional funds to support team building and staff cohesion in a remote/hybrid work environment.

**Miscellaneous Expense**
Miscellaneous Expenses for FY2024 are $12,800 and consist of those items in each of the budget areas that do not fit into a specific category. These costs have ranged from $3,000 to $22,000 in the FY2019–FY2024 time frame.

**Meeting Expense**
The budget for meetings expense is higher than prior years at $3,264,112 and is one of the main benefits ADEA provides to members, sponsors, and partners. This category includes participant food and beverage costs, audiovisual equipment, speakers and facilitators, meeting space rental and other meeting related costs for the ADEA Fall Meetings, ADEA Deans’ Conference, ADEA Sections on Business and Financial Administration and Clinic Administration (BFACA) Meeting, ADEA Annual Session & Exhibition, and the ADEA Allied Dental Program Directors’ Conference, in addition to a variety of other ADEA conferences.

In FY2023 we budgeted for contingencies depending on where the pandemic was heading. As it turns out we did not have to use those funds in FY2023. The FY2024 budget is impacted by higher travel and venue/catering costs which have increased dramatically.

**Donated Services**
Donated Services usually consist of professional services donated to the organization from supporters and partners. In past years donated services have ranged from $3,000 to $46,000 annually.

**Awards and Fellowships**
ADEA recognizes achievement and distinction among its members through an awards program. In conjunction with ADEA’s corporate partners, ADEA offers student scholarships, awards for educators and funding opportunities for various fellowships. The budget for FY2024 is $26,000 and is dependent on corporate sponsorships.

**Marketing and Promotion**
Total marketing costs budgeted for FY2024 is $779,390. Beginning in FY2021 ADEA separated the overall marketing budget into its key elements and separate line items. The line items for FY2024 include Design ($210,610), ADEA Advertising ($150,920), Media ($54,500), Commissions ($152,000) and Promotional Items ($130,730). Breaking out these items allows for better tracking of ADEA’s overall marketing expenses and provides better information to determine where to allocate marketing resources.

**Business Meals and Entertainment**
The budget for this area is $34,650 and the increase reflects a move away from dinners and receptions at restaurants rather than at the hotel. There have been corresponding reductions in catering costs at meetings.
<table>
<thead>
<tr>
<th></th>
<th>Actual FY 2020</th>
<th>Actual FY 2021</th>
<th>Actual FY 2022</th>
<th>Budgeted FY 2023</th>
<th>Budgeted FY 2024</th>
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<td>Payroll Protection Revenue</td>
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<td>Previously Approved Project Funds Remaining</td>
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<td><strong>TOTAL OTHER</strong></td>
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<td><strong>TOTAL REVENUE AND SUPPORT</strong></td>
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<td><strong>31,364,265</strong></td>
<td><strong>32,251,985</strong></td>
<td><strong>32,753,328</strong></td>
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### ADEA & ADEA Gies Foundation
### Expense Budget
### Exhibit 2-2023
### Fiscal Year 2023

#### EXPENSES

<table>
<thead>
<tr>
<th>Category</th>
<th>Actual FY 2020 Expenses</th>
<th>Actual FY 2021 Expenses</th>
<th>Actual FY 2022 Expenses</th>
<th>Budgeted FY 2023 Expenses</th>
<th>Budgeted FY 2024 Expenses</th>
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<tr>
<td><strong>Salaries</strong></td>
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<td>7,520,512</td>
<td>9,289,177</td>
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<td><strong>Consultants and Honoraria</strong></td>
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<td><strong>Legal Fees</strong></td>
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<td><strong>Professional Fees</strong></td>
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<td><strong>Total Personnel Services</strong></td>
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<td>10,565,410</td>
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<td><strong>Staff Travel</strong></td>
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<td>177,099</td>
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<td><strong>Bank and Credit Card Processing Fees</strong></td>
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<td><strong>Rent and Refurbishing</strong></td>
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<td>1,489,169</td>
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<td><strong>Depreciation and Amortization</strong></td>
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<td>487,618</td>
<td>435,483</td>
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<td><strong>Office Equipment Rental</strong></td>
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<td><strong>Memorials and Contributions</strong></td>
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<td>96,714</td>
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#### TOTAL EXPENSES

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<td><strong>Net Operating Surplus (Deficit)</strong></td>
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