**APhA Academy of Student Pharmacist**

**2023-2024 National Officer Application**

**APPLICATION INSTRUCTIONS**

Serving as an American Pharmacists Association Academy of Student Pharmacists (APhA-ASP) National Officer is rewarding and challenging, both professionally and personally. Officers who choose to serve their profession in this capacity have the personal honor of knowing that they have been elected to represent student pharmacists in a national and international professional organization. At times, serving as an APhA-ASP National Officer is a difficult and demanding job, but the position is meant to complement, not compete with the leader’s education.

APhA-ASP National Officer positions consist of the following:

• National President-elect (1)

• National Member-at-large (2)

• Speaker of the House (1)

2023-2024 APhA-ASP National Officer elections will be during the APhA2023 Annual Meeting & Exposition in Phoenix, AZ, March 24-27. Information about the candidates will be posted March 7, 2023. Candidates will be notified as soon as possible of changes to the elections or responsibilities of national office**.**

Please review the APhA-ASP National Officer Responsibilities, APhA-ASP CAPSULE, and election rules of procedure documents prior to completing the application. Type your responses to all of the questions and statements below. Submit your application as a word.docx file and include your name in the file name.

**Completed applications must be submitted by 11:59 pm PT on February 7, 2023 to** **APhA-ASP@APHANET.ORG****. Completed applications must include:**

* APhA-ASP National Officer Application
* Unofficial Transcript
* Headshot
* CV or Resume
* Candidate Consent Form
* Dean, Advisor, & Experiential Consent Form

Candidate information will be posted on March 7, 2023.

All questions regarding APhA-ASP National Office may be submitted to Crystal Atwell, PharmD, APhA Senior Director of Student & New Practitioner Development at CAtwell@aphanet.org.

**CANDIDATE INFORMATION**

1. Candidate for the position of (please select one):

 \_\_\_ APhA-ASP National President-elect

 \_\_\_ APhA-ASP National Member-at-large

 \_\_\_ APhA-ASP Speaker of the House

1. Candidate Name (as you would like it to appear on the website and promotional materials):

­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Candidate APhA Membership ID #:

­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Candidate School or College of Pharmacy:

­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Please indicate the type of program at your school or college of pharmacy and your current year:

 \_\_\_ 3 year PharmD Program \_\_ 1st \_\_ 2nd \_\_ 3rd

 \_\_\_ 4 year PharmD Program \_\_ 1st \_\_ 2nd \_\_ 3rd \_\_ 4th

 \_\_\_ 6 year PharmD Program \_\_ 1st \_\_ 2nd \_\_ 3rd

 \_\_ 4th \_\_5th \_\_ 6th

1. Candidate Anticipated Graduation Year:

­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Candidate Email Address

­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Candidate Phone Number (for staff use only):

­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CANDIDATE GOAL STATEMENT**

Write a concise, typed statement in 200 words or less, which includes your goals for the position you are seeking, how you would attempt to achieve these goals, and your general philosophies about the APhA Academy of Student Pharmacists (APhA-ASP), and APhA-ASP programs and activities.

This statement will be posted on the APhA-ASP website. Statements exceeding 200 words will be truncated at the word limit.

**CANDIDATE BACKGROUND & EXPERIENCE**

1. **List any previous leadership experiences you have had on the national, state, and local levels. Also, specifically list any positions you have previously held in the APhA Academy of Student Pharmacists on the local, regional and/or national level.**

*This information will be posted on the APhA-ASP website. Please limit your statement to 500 words or less. Statements exceeding 500 words will be truncated at the word limit.*

1. **What are your general philosophies about the programs and activities of APhA and APhA-ASP? Limit your statement to 500 words or less.**
*Statements exceeding 500 words will be truncated at the word limit. This information will be posted on the APhA-ASP website.*
2. **Please list or describe any specialized talents or skills, along with all pertinent information that indicates your qualities to fulfill the position. Limit your statement to 500 words or less.**

*Statements exceeding 500 words will be truncated at the word limit. This information will be posted on the APhA-ASP website.*
3. **List any professional honors and/or awards you have received and the reasons why they were awarded. This information will be shared with APhA-ASP Nominating Committee.**