

AAOA VOLUNTEER FORM

"Volunteerism is the voice of the people put into action. These actions shape and mold the present into a future of which we can all be proud." – Helen Dyer

The AAOA has numerous options for active members to participate in the organization. Whether on a one-time basis or in a more substantial role, members who would like to help further the education of otolaryngology and lend support to the ongoing mission of enhancing the knowledge and skills of AAOA physicians and others in their care of the allergic patient have the opportunity to volunteer. If you'd like to be considered for a volunteer role within the AAOA, please complete this Volunteer Application.

First Name _____

Work Address _____

Last Name _____

Home Address _____

Email _____

Phone Number _____

Please select how you'd like to volunteer with the AAOA:

- | | |
|--|---|
| <input type="checkbox"/> Support the Fellow Exam: <input type="radio"/> Exam workgroup <input type="radio"/> Examiner <input type="radio"/> Proctor | <input type="checkbox"/> Appointment to a Committee <input type="checkbox"/> Consideration as Education Faculty <input type="checkbox"/> Other—please specify roles or opportunities you see _____ |
| <input type="checkbox"/> Appointed to a Presidential Taskforce/Workgroup | _____ |

Indicate the Committee(s) or Workgroups on which you would be interested in serving:

- | | |
|---|---|
| <input type="checkbox"/> Bylaws Committee | <input type="checkbox"/> Patient & Professional Relations Committee |
| <input type="checkbox"/> Corporate Development Committee | <input type="checkbox"/> Socioeconomic Committee |
| <input type="checkbox"/> Education Assessment Workgroup—Fellow Exam | <input type="checkbox"/> AAOA Foundation Grant Review Committee |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> IFAR Reviewer |
| <input type="checkbox"/> Investment Committee | |

If you would like to be involved in AAOA Educational Programs, the first step is to submit a presentation abstract for consideration for the Annual Meeting. It can be clinical, business of medicine, or novel research. Creative formats are encouraged. Check the website for the submission link (aaoallergy.org). Additionally, share your previous presentation experience and any related educational experience.

Please answer the below questions. Your responses will be reviewed as part of your application process.

Please describe any AAOA-related activity you've been involved with in previous years:

What is your primary motivation for volunteering to serve?

Please list your experience working with hospital leadership, medical staff, community organizations, otolaryngology society or other non-otolaryngology organizations that uniquely qualify you for the position for which you'd like to be considered.

Please list any experience you possess that will be valuable in the position for which you'd like to be considered.

Please provide a 1-paragraph personal statement highlighting contributions and skills pertinent to the position for which you are applying for or volunteering.

Please check the below confirming you fully understand there is a time commitment for the position(s) you are considering and acknowledging you will fulfill the time commitments, including but not limited to attendance at meetings associated with the position.

☐ I Agree

Please upload your personal Curriculum Vitae (CV) which should not exceed three (3) pages. Upload Curriculum and to complete the form online, please use this link: <https://aaoa.cloud-cme.com/Form.aspx?FormID=2339>. You can also email a PDF of the form and your CV to: info@aaoallergy.org.

We know your time is valuable. Most committee work is done via email or zoom to help use everyone's talents and expertise more efficiently.