



# NAADAC Committee Application Form

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*To serve on a NAADAC Committee, current NAADAC membership in good standing is required. To apply, please email your resume and completed application to [naadac@naadac.org](mailto:naadac@naadac.org).*

## **Basic Information**

Full Name: \_\_\_\_\_ Credentials: \_\_\_\_\_

Employer: \_\_\_\_\_ Title: \_\_\_\_\_

NAADAC Member Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

## **Committee Information**

Committee descriptions are available at [www.naadac.org/naadac-committees](http://www.naadac.org/naadac-committees). Which committee(s) are you interested in?

Standing Committees include:

### **Operational Committees**

- Executive Committee
- Awards Committee
- Bylaws Committee
- Ethics Committee
- Finance & Audit Committee
- Membership Committee
  - Student Sub-Committee
- Nominations & Elections Committee
- Personnel Committee
- Public Policy Committee

### **Practice Standards Committees**

- Adolescent and Emerging Adults Committee
- Clinical Supervision Committee
- Critical Issues in the Black Community Committee
- LGBTQAI+ Committee
- Military and Veteran's Affairs Committee
- Older Adults Committee
- Peer Specialist Committee
- Prevention Committee

Please explain how your qualifications/experience will contribute to this committee(s).

What interests you in joining this specific committee(s)? Do you have specific ideas to share with this committee(s)?  
Please separate your responses by committee if applying for multiple committees.

Other qualifications:

Have you chaired or been a member of a NAADAC committee before?  Yes  No  
If yes, please list which committee(s) & dates served:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_