



Application for IAETDAA Director Membership

Please complete this form in English. All information will be treated confidentially.

Part 1: Personal Information			
Full Name		Current Position	
Institution/Affiliation			
Business Address			
Email Address		Phone Number	
IAETDAA Membership ID			
Membership Category Applied For	<input type="checkbox"/> Standing Director Member <input type="checkbox"/> Honorary Director Member		
Part 2: Professional Qualifications & Achievements			
2.1 Please briefly describe your professional background and years of experience in relevant fields.			
2.2 Please list your key professional qualifications, certifications, or highest degree obtained			
2.3 Summarize your most significant professional achievements or contributions to the field (max 3).			
1. 2. 3.			
Part 3: Leadership & Influence			
3.1 Describe leadership roles you have held in the past five years (e.g., institutional management, project leadership, committee positions).			



3.2 Provide a specific case where your leadership created significant impact.
Part 4: Academic Contributions
4.1 List your most representative publications from the past five years (max 5).
4.2 Describe your roles as reviewer, editorial board member, or advisor for other academic journals, conferences, or organizations.
Part 5: Vision & Commitment
5.1 Why do you wish to become an IAETDAA Board Member? What unique value can you bring to the Association's strategic development?
5.2 What do you see as the key challenges and opportunities facing the global arts in therapy field in the next 3-5 years?
5.3 How do you plan to contribute your time, expertise, and resources to the Association? (e.g., participating in committee work, leveraging networks, leading specific projects)



Part 6: Referee Information			
Referee 1			
Name		Title	
Institution			
Email		Relationship to Applicant	
Referee 2			
Name		Title	
Institution			
Email		Relationship to Applicant	
Please note: The Nominating Committee will contact referees directly.			
Part 7: Applicant Declaration			
I confirm that the information provided above is true and accurate.			
I understand and accept that, if successful, I will abide by the IAETDAA Constitution, Board Code of Conduct, and fulfill the corresponding financial contribution (Governing Board Member: \$750 USD/year).			
I authorize the IAETDAA Nominating Committee to verify the information I have provided for assessment purposes.			
Applicant Signature:		Date:	

★Submission Instructions

Please submit this completed form along with the following supporting documents to iaetdaa@gmail.com:

1. Current Curriculum Vitae
2. Full list of academic publications
3. Letters of Recommendation (2)

Nominating Committee Contact

For any inquiries, please contact us via the email above.