

**BIOGRAPHICAL STATEMENT AND CONSENT TO SERVE FORM**

Name: \_\_\_\_Catherine Collins\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_628 Lexington Ave, Apt 3 Indianapolis, IN 46203\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone: \_\_317-880-9721\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_317-225-9060\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Employer: \_\_\_\_Eskenazi Health\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail: \_\_\_Catherine.Collins@Eskeanzihealth.edu\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Years of Membership in APTA and Indiana Chapter: \_\_\_\_\_4\_\_\_\_\_\_\_

POSITION RUNNING FOR: \_\_\_\_\_\_\_\_New Professional on the Board of Directors or Nominating Committee Member\_\_\_\_\_\_\_

Education: Doctorate of Physical Therapy from Indiana University, Bachelor of Science from Purdue University

Previous APTA/Other Leadership Activities:

- APTA Federal Advocacy Forum Student Attendee (2015)

- Indiana University DPT ’15, Class President  (Jan. 2013-May 2015)

- IUPUI School of Health & Rehabilitation Sciences Student Executive Committee (2014)

- IUPUI Student Physical Therapist Organization President (Jun. 2013 – Aug. 2014)

- APTA House of Delegates Student Usher (2013)

Write a statement about why you want to run for a particular position (this will be published in your words):

While in school and as a new graduate, serving members of the Indiana Chapter of the APTA Board shared their passion for the organization’s opportunities for learning, mentoring, service, and beyond. Through scholarships, mentoring, and other events, the INAPTA demonstrated the value of investing in its constituents. I have been blessed to have such mentors in my professional life who taught me the value to being involved, particularly through the APTA. Being a less seasoned therapist, I value the continued guidance the INAPTA provides while also understanding the value of input from recently graduated therapists with the ever-changing landscape of healthcare. I would be honored to have this opportunity to give back to this organization serving in either of these capacities to impact other therapists, aspiring therapists, and ultimately the patients we serve. Having worked in an inpatient department at a county hospital, I strive to serve on the INAPTA Board of Directors or Nominating Committee with the same drive and devotion as I do for every patient, family, and coworker I have the opportunity to impact.

**Consent to Serve Statement:**

I acknowledge the duties of the above position have been provided to me and I agree to serve in the position should I be slated and then elected. I am willing and able to attend all INAPTA Meetings as requested. I agree to be responsive to electronic communications as part of conducting the business of INAPTA.

Signature: \_\_\_\_\_Catherine M Collins\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_9/15/2016\_\_\_\_\_\_\_\_\_\_

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Please return the Biographical Statement & Consent Form and Headshot to inapta@apta.org by September 16, 2016.