

**BIOGRAPHICAL STATEMENT AND CONSENT TO SERVE FORM**

Name: \_\_\_\_\_David W. Candy\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_7707 Gold Coin Drive, Avon, IN, 46123\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone: \_\_\_317-272-4186\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone:\_\_\_\_\_\_513-314-9381 (cell)\_\_\_\_\_\_\_\_\_\_\_\_

Current Employer: \_\_Hendricks Regional Health\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail: \_\_dwcandy@hendricks.org\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Years of Membership in APTA and Indiana Chapter: \_9 APTA, 7 INAPTA\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSITION RUNNING FOR: \_\_\_\_\_Director at Large - Central\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Education:**

The Manual Therapy Institute Las Vegas, NV

APTA Credentialed Fellowship in Orthopedic Manual Physical Therapy 10/2012

University of Pittsburgh Pittsburgh, PA

Doctor of Physical Therapy 04/2008

University of Pittsburgh Pittsburgh, PA

Bachelor of Science in Rehabilitation Science (concentration in Athletic Training) 04/2005

**Previous APTA/Other Leadership Activities:**

Content Expert, Orthopedics 2014-present

American Board of Physical Therapy Specialties

Secretary/Treasurer 2011-2014

INAPTA Orthopedic and Manual Therapy Special Interest Group

Chair 2014-present

INAPTA Orthopedic and Manual Therapy Special Interest Group

Vice President 2015-present

INAPTA Central District

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

I have had the pleasure of serving INAPTA in a variety of capacities over the past 5 years. Through my involvement in INAPTA, I have met some amazing people who share a common interest if furthering the profession of physical therapy. I consider physical therapy not only a career, but a passion, and I enjoy being able to give back to the profession. In the position of Director at Large (Central), I would have the opportunity to represent my colleagues in central Indiana on the Board of Directors to assure that their professional needs and values are heard as the Board strategically plans for the future direction of physical therapy in Indiana. Thank you for considering me for this opportunity to serve *you*, the valuable members that make up INAPTA

**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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_9/4/2016\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE PROVIDE A HEADSHOT (DOES NOT NEED TO BE FORMAL)

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