

## Attestation Statement of Candidates applying for KDA Elective Positions

This document must be signed by all candidates applying for vacant elective positions in the Kentucky Dental Association.

This statement attests that all information contained in the applicant's **Application Packet** is correct and that the candidate is able and willing to perform the duties of the office he/she is seeking.

I, the undersigned, affirm the following:

- a. To the best of my knowledge, all information included in my Application Packet is accurate.
- b. I am willing and able to perform the duties of the office I am seeking.

Signature \_\_\_\_\_

Date \_\_\_\_\_