

# Omega Beta Iota

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National Osteopathic Political Honor Society



*OFFICIAL STUDENT APPLICATION 2021*



**Joshua Berko**, *National Director*  
**Bryce Beatty**, *National Operations Chair*  
**Kristina Novotny**, *National Membership Chair*  
**Heidi Dreher**, *National Public Relations Chair*  
**Brooke Grill**, *OBI-OPAC Liaison*  
**Amanah Fatima**, *National Advocacy Liaison*  
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**Dr. Aerial Petty**, *Resident Physician Advisor*  
**Dr. Majot Mashiana**, *Resident Physician Advisor*

## OFFICIAL APPLICATION 2021

### APPLICANT INFORMATION\*

**Applicant Name:**

**AOA ID:**

**Address (*Street, City, State, and Zip Code*):**

**Phone Number:**

**Email address:**

**Osteopathic School:**

**Anticipated Graduation Date:**

**Have you previously applied to Omega Beta Iota? \*** ☐ **yes** ☐ **no**

\* Please complete all mandatory items above; failure to do so may delay application acceptance

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### Student Membership

*Membership within Omega Beta Iota is based strictly on an applicant successfully demonstrating their osteopathic political experience through the completion of several requirements. The more involved an applicant is, the greater their chances are of being inducted. Ultimately, it is up to the discretion of the National Board if an individual meets the criteria for induction into Omega Beta Iota.*

#### Category 1: The following criteria are **REQUIRED** for induction into Omega Beta Iota\*

##### ☐ **Membership in the American Osteopathic Association (AOA)**

1. Verification of membership in good standing shall occur in one of the following manners: by submission of a copy of the applicant's current AOA membership card, or by supplying the AOA identification number only, which shall be confirmed by the national AOA membership roster.

##### ☐ **Successful completion of a minimum of one semester of medical school**

1. OMS-I may qualify for induction only after successfully completing one semester of coursework. Verification of this shall occur via the submission of an official transcript, if deemed necessary.

##### ☐ **Submission of a letter of recommendation from a politically involved physician (D.O. or M.D.), politician, or politically involved faculty/administrator who can attest to the applicant's political involvement.**

1. The letter of recommendation may be submitted separately **by the letter writer** via e-mail to the **National Membership Chair at [OBIMembershipChair@gmail.com](mailto:OBIMembershipChair@gmail.com)** or it can be submitted by you as a part of your completed application.

***Please note:** If the letter writer is submitting a letter on behalf of you, it must be received by the application deadline. We will not accept late submission of letters. Additionally, please ask your letter writer to title the attachment as follows: "ApplicantFirstNameLastname\_LOR." Example: "JohnDoe\_LOR"*

2. The letter of recommendation must be signed on an official letterhead.

##### ☐ **Submission of a completed, official ΩBI application prior to the determined deadline**

\* An applicant must meet all requirements listed in category 1 and at least one requirement in both category 2 and category 3.

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### Category 2: Membership (in good standing)\*

**An applicant must meet at least 1 criteria in Category 2.**

*NOTE: It is the responsibility of the applicant to supply verification of membership as specified in each item below. Letters of recommendation from Category 1 do NOT count as a form of proper verification of membership.*

#### ☐ **Membership in the Student Osteopathic Medical Association (SOMA)**

1. Verification of membership in good standing shall occur in the following manner: the President or NLO of the applicant's local SOMA chapter shall supply a letter attesting to the applicant's membership and level of participation in the local SOMA chapter, where appropriate; additionally, applicant membership within SOMA will be confirmed by the national SOMA membership roster. If you are President or NLO, have your other executive board member draft your letter.

#### ☐ **Membership in your respective State Osteopathic Medical Association (i.e. if the applicant goes to school in Florida, the applicant should be a member of FOMA)**

1. Verification of membership in good standing shall occur in the following manner: the chapter president of the applicant's state osteopathic association shall supply a letter attesting to the applicant's membership and level of participation.

#### ☐ **Leadership role in Student Government Association or National Osteopathic Association (e.g. COSGP) and/or on campus**

1. Verification shall occur by a letter from the organization/SGA president or chair.

#### ☐ **Osteopathic Political Action Committee (OPAC) Student Chairman's Club Membership<sup>†</sup>**

1. Verification of this requirement shall occur in the following manner: confirmation of membership by the American Osteopathic Information Association/OPAC<sup>‡</sup>

*\*An applicant must meet all requirements listed in category 1 and at least one requirement in both category 2 and category 3*

*<sup>†</sup>OPAC members will be highly considered for acceptance but membership is NOT mandatory for induction*

*<sup>‡</sup>Confirmation may be verified by providing a registration/confirmation email from the AOIA/OPAC attached to this application*



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### **Category 3: Political Advocacy/Activism and Training\***

**An applicant must meet at least 1 criteria in Category 3.**

*NOTE: It is the responsibility of the applicant to supply verification of participation as specified in each item below. Letters of recommendation from Category 1 do NOT count as a form of proper verification of participation.*

☐ **Past participant of DO Day on Capitol Hill, COM Day on Capitol Hill, or applicant's respective state DO Day, SOMA's Day of Advocacy, Bureau of Emerging Leaders event, or achieve gold rank through the Osteopathic Advocacy Network**

1. An acceptable alternative for one year of participation in D.O. Day is the successful completion of the Osteopathic Health Policy Internship (OHPI) program offered through the AOA
2. Verification of participation shall occur in the following manner: confirmation of participation by submission of registration receipt, screenshots, or other proof of your attendance and participation. Confirmation will occur through the AOA Department of Government Regulations or State Osteopathic Association<sup>†</sup>

☐ **Participation in local/state/national political campaigns**

1. Verification of participation shall occur in the following manner: submission of a letter of recommendation from an individual that can attest to the applicant's local/state political involvement or submission of a signed letter of participation from a qualified campaign representative (campaign manager, political candidate, etc.)

☐ **Participation in American Association of Colleges of Osteopathic Medicine (AACOM) "Ed to Med" national grassroots advocacy campaign as a Student Ambassador**

1. Verification of participation shall occur in the following manner: submission of registration and/or activity. Confirmation will occur through the AACOM Government Relations Team<sup>‡</sup>

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\* An applicant must meet all requirements listed in Category 1 and at least one requirement in both Category 2 and Category 3

† Confirmation may be verified by providing a registration/confirmation email from the event attached to this application

‡ Confirmation may be verified by providing a registration/confirmation email from AACOM-GR attached to this application



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### PROFILE DATA

**Total # of Application Attachments:**

**Membership (SOMA, OPAC, etc.) dates, if applicable:**

**D.O. Day on the Hill or AACOM COM Day on Capitol Hill Participation (dates):**

**Political Involvement (include additional sheet if necessary)\*:**

ACTIVITY

DATE

LOCATION

**Leadership Experience (include additional sheet if necessary)†:**

POSITION

DATE

RESPONSIBILITIES

\* Please indicate page number of the additional sheet attached

† Please indicate page number of the additional sheet attached



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### ΩBI COM-SOM Liaison Position Opportunity

☐ Check this box if you are interested in becoming an ΩBI COM-SOM Liaison. ΩBI will consider candidates who are currently enrolled and in good academic standing at their medical school.

The COM-SOM Liaison will act as a direct point of contact between the ΩBI National Executive Board and their respective COM/SOM.

The duties of a COM-SOM Liaison are to:

- Represent the national organization at the local level
- Attend two mandatory meetings with the ΩBI National Board - one at the start of the term and one at the end of the term
- Host one information meeting per ΩBI application cycle discussing ΩBI membership and core values
- Host at least one event separate from above that coordinates local political advocacy activities for students and physicians including, but not limited to, letter-writing campaigns, lobbying at the state capital, volunteering time on local campaigns (phone calls, poll working, etc), holding discussions on “hot topics,” inviting politicians to campus, etc. Each COM/SOM Liaison of ΩBI is encouraged to partner with their local SOMA chapter, COSGP leadership, or political interest groups
- Provide the ΩBI National Board with proof of the above events via picture or social media post
- Help coordinate student and physician attendance at the annual state association D.O. Day on the Hill and at the AOA’s annual D.O. Day on the Hill
- Assist in the recruitment of prospective ΩBI inductees

COM-SOM Liaison Term Length:

Each COM/SOM liaison term begins on April 15 of the respective year and ends on April 14 of the following year



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**Completed applications must be submitted by 11:59 pm EST September 15<sup>th</sup>, 2021.** Applications should be typed and scanned. Please send your application with all attached documents/letters in ONE PDF file to the **National Membership Chair at [OBIMembershipChair@gmail.com](mailto:OBIMembershipChair@gmail.com)**. If needed the Letter of Recommendation can be emailed separately by the letter writer to [OBIMembershipChair@gmail.com](mailto:OBIMembershipChair@gmail.com) by the application due date.

If you have any questions, please reach out to us at [OBIMembershipChair@gmail.com](mailto:OBIMembershipChair@gmail.com) or [OBINationalDirector@gmail.com](mailto:OBINationalDirector@gmail.com).

Thank you and we look forward to reviewing your application!

**All items must be received by 11:59 pm EST September 15<sup>th</sup>, 2021.**

**LATE SUBMISSIONS WILL NOT BE CONSIDERED.**

I hereby certify that the information above is complete and accurate to the best of my knowledge. I understand that submitting my application to the Omega Beta Iota national osteopathic political honor society does not guarantee my selection for membership therein.

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(Signature of Applicant)

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(Date)

