

AMERICAN COUNSELING ASSOCIATION

Candidate Information Form

To Be Completed by Candidate – **This section is not included in the word count.**

Name: June M. Williams

Association Organization: ACCA

Nominated Position: Governing Council Representative

MANDATORY CATEGORIES (Word Count Begins at This Section)

Full Name: June M. Williams

Title and Full Business Address: Associate Professor, Southeastern Louisiana University
SLU 10863, Hammond, LA 70402

Education: Ph.D., Counselor Education, University of New Orleans, 1997; M.Ed., Counselor Education, University of New Orleans, 1991; B.S., English Education, Louisiana State University, 1983

Certification and Licensure: LPC & LMFT, Louisiana

Recent Professional Experience: Southeastern Louisiana University: Associate Professor, Counseling Program, 2007-present; Assistant Professor, Counseling Program, 2001-2007; Assistant Dean of Student Life, 1998-2000; Assistant Director, University Counseling Center, 1995-1998

Association Experience: Chi Sigma Iota President (2007-2008); ACCA President (2005-2006); LCA President (1997-1998); LCCA President (1994-1995)

ACA Branch, Division and Affiliate Membership, and Other Related Memberships: _ACCA; ACES; ACC; AADA; Chi Sigma Iota (Life Member); LCA; LCCA; LACES; LASERVIC

Optional Categories

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Name: Association Organization: ACCA

Nominated Position: Governing Council Representative

Awards and Honors: ACCA Professional Leadership Award (2009); ACCA Special Meritorious Service Award (2004); Presidential Recognition Award for Distinguished Service to the Louisiana Counseling Association (2003-2004); ACES Outstanding Dissertation Award (1998)

Publications and Presentations:

Williams, J., & Spruill, D. (2005). Surviving and thriving after loss. *Journal of Creativity in Mental Health Counseling, 1* (3/4), 51-70.

Williams, J., Holland, C., & Hebert, B. (2007, February). *Be prepared! Don't Hide! Disaster Preparedness*. Presented at the Georgia College Counseling Association Conference, St. Simon's Island, GA.

Community Service:

I, _____, certify that I have checked the above candidate information and it does not exceed the word limit. I have followed the prescribed format and understand that if my text exceeds the **200-word limit** my text will be truncated at the sentence closest to the word limit.

I accept the nomination as a candidate for the above office. I understand the duties of the office. If elected I will serve to the best of my ability.

Signature

Date

GOALS STATEMENT FORM

(Only complete if you are running for one of the following: ACA President-Elect, Division President-Elect, Regional Governing Council Representative and Governing Council Representative)

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Goals Statement

In **300 words** or fewer, explain why you are the candidate best qualified for the position you desire.

I believe that my leadership experiences with ACA and LCA over the past 15 years provide me with a strong foundation and understanding of ACA. Early in my leadership development (1994), I was selected as one of two emerging leaders to represent Louisiana at the Southern Region Branch Assembly of ACA, where I was exposed for the first time to ACA leaders, branch leaders, and regional leaders. This experience was eye-opening for me and challenged me to see ACA as a vibrant, vital, and relevant professional association and not just some entity "out there" to whom I paid dues. Subsequently, I served as president of a branch division (LCCA), of a branch (LCA), of an ACA division (ACCA), and also of Chi Sigma International. All of these positions have brought me into close contact with various aspects of ACA leadership, and I believe that my active involvement with ACA has made me aware of ACA's strengths and challenges through the years.

In addition to my experiences with ACA, I believe that I possess qualities and skills that will enable me to effectively serve as a member of the Governing Council. My interpersonal relationship style is one that is very respectful of others' opinions; I have the ability to listen carefully, consider various viewpoints, and make sound decisions. In all of my leadership positions, I have gained a reputation as

being inclusive, fair, responsible, and thoughtful. I believe that these qualities would serve me well as your Governing Council representative.

I, _____ certify that I have checked the above candidate information and it does not exceed the word limit. I have followed the prescribed format and understand that if my text exceeds the **300-WORD LIMIT** that my text will be truncated at the sentence closest to the word limit.

Signature

Date

REMEMBER PRESIDENT ELECTS AND REGIONAL GOVERNING COUNCIL REPRESENTATIVES SEND YOUR 2" X 3" COLORED PHOTOGRAPH BY JULY 1, 2009!