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ATCB Review

The ATCB Review is published three times annually. Submission deadlines for publication are January 15 for the Spring issue, April 15 for the Summer issue, and September 15 for the Fall issue. Please send information to atcbinfo@atcb.org.

MISSION

The mission of the Art Therapy Credentials Board is to protect the public by promoting the competent and ethical practice of art therapy through the credentialing of art therapy professionals.

How Will AATA's New Education Standards Affect the ATCB's Requirements?

Ed Oechsle, ATR-BC, ATCS, ATCB President

When ATRs have completed a rigorous educational program and worked in the field under an approved supervisor they may apply for and receive their credentials, and in addition to the ATR requirements, ATR-BCs have passed the Art Therapy Credentials Board Exam (ATCBE). These are the standards by which the ATCB qualifies art therapists to practice their profession. In the near future art therapy education programs will be changing and the ATCB is reviewing its standards in response.

In June the American Art Therapy Association's Task Force for Revision of Master's Education Standards released its recommended guidelines, which will now be used to write the Accreditation Council on Art Therapy Education (ACATE) Standards & Guidelines. ACATE will be an independent organization replacing AATA's Education Committee in approving Master's degree programs in Art Therapy. This new body is required to meet the standards of the Commission on Accreditation of Allied Health Education Programs (CAAHEP) which will provide accreditation of programs. An organization (ACATE) separate from the membership association (AATA) with oversight by an accrediting body (CAAHEP) is essential in maintaining the integrity of any approval process. We applaud the members of the task force for taking on a comprehensive review of art therapy program standards and the AATA board for adopting them.

As these new standards are phased in to art therapy programs, how will ATCB standards be affected? Right now, the ATCB's Registration Standards Committee is reviewing the document and will be advising the board of any recommended changes to our education and supervised experience requirements to maintain consistency with ACATE approved program content areas. We will also look at education and supervision requirements for applicants with degrees from "non-approved programs" as well as art therapy applicants with degrees in a related mental health field for equivalency in all content areas with approved programs. *(continued on page 2)*

How Will AATA's New Education Standards Affect the ATCB's Requirements?

Ed Oechsle, ATR-BC, ATCS ATCB President
(continued from cover)

The ATCB's practice will continue to consider applicants with Master's or doctoral degrees in a related mental health field and supervised experience for multiple reasons. First, we understand that accreditation will be desired by state licensing boards, but until a tipping point is reached where there are more state licensing bodies depending on our credential for license review AND accreditation than those that do not have art therapy licensing we feel it would be exclusionary to require ACATE approval of all applicants. Second, many states do not have master degree programs in art therapy. Until they do we feel that to enable the growth of this profession beyond its current scope, we must maintain a way for applicants to receive their education and supervised hours through creative means – even if there are only two applicants in five years. And finally, we believe in the integrity of our process in serving our mission: to protect the public by promoting the competent and ethical practice of art therapy through the credentialing of art therapy professionals. It is ACATE's mission to approve programs, but it is the ATCB's mission to examine each individual applicant by looking at specific educational content areas to ensure compliance with our requirements. Our accreditation by the National Commission for Certifying Agencies (NCCA) and our independence from membership organizations and program approval bodies, as well as the ATCB's critical review of every application, ensures the integrity of our credential. ☞

Message from the ATCB President



Ed Oechsle
President

In this issue of the ATCB Review you will find several interesting articles relating to art therapy credentialing that I hope you enjoy reading. Melissa Walker, ATR, a credential holder who has garnered a lot of publicity lately for our profession, tells her personal story of finding the profession; Mary Ellen McAlevey, MA, LPC,

ACS, ATCS examines the financial benefits of art therapy credentialing; Heidi Larew, ATCS, LPCC-S, LICDC-CS, ACS, NCC, and Mindi Rojas, MS, ATR-BC discuss the experience of serving on a committee of the ATCB; and I look at the upcoming changes to AATA's education program approval and how they may or may not affect the ATCB registration standards. Please also join me in congratulating all the new credential holders for their hard work and dedication to the field of art therapy and the Art Therapy Certified Supervisor (ATCS) credential for its fifth year anniversary. ☞

This is Ed's last newsletter as ATCB's President. Thank you Ed for all of your hard work and commitment to the National Office, Board and the Art Therapy profession. We will miss you.

Coming Spring 2016
An even better
ATCB Review !



Only A Few: 11" x 14" x 3/4" Encaustic on Panel



Deadlines

March 31 Recertification. If you are an ATR-BC who is due to recertify in 2016, you should receive your recertification notice by March 31 via postal mail. If you are not sure whether you are due to recertify in 2016, please refer to the expiration date on your ATR-BC certificate or contact the ATCB National Office.

April 29 Early Application Deadline for BC. If you are an ATR and plan to take the ATCB Examination for Board Certification during the National paper/pencil administration on July 9, 2016, you can save \$25 by submitting your application before this date. The application is available on the ATCB website, atcb.org.

May 16 Recertification. If you are an ATR-BC who is due to recertify in 2016 and who needs an extension of the time to obtain the required CECs, you must submit a written request with the extension fee of \$50 by this date.

May 27 Final Application Deadline for BC. If you are an ATR and plan to take the ATCB Examination for Board Certification, your ATR-BC application must be postmarked by this date.

June 1 Recertification Deadline. If you are an ATR-BC who is recertifying in 2016, your completed application for recertification must be postmarked by this date.

June 30 Annual Renewal Deadline. ATR/ATR-BC/ATCS annual renewal and fee are due by this date. Notices will be mailed by May 13. If you do not receive a notice by June 1, please contact the ATCB National Office.

July 9 ATCB Examination. National paper/pencil administration of the Art Therapy Credentials Board Examination (ATCBE).

Deadlines for ATCB Examination, Computer Based Testing (CBT)

Testing Window	Deadline by which CBT application must be postmarked
January 4 - 16, 2016	December 4, 2015
March 7 - 19, 2016	February 5, 2016
September 6 - 19, 2016	August 5, 2016

Art Therapy Credentials Board Examination

Board Certification (paper-pencil) Examination Date and Locations

Saturday, July 9, 2016

Albuquerque, NM

Baltimore, MD

(AATA conference)

Chicago, IL

Louisville, KY

Los Angeles, CA

New York, NY

Rochester, NY

April 29, 2016 is the early deadline to apply for Board Certification and take the paper-pencil administration of the exam on July 9, 2016. The final deadline is May 27, 2016. ATRs applying for Board Certification by the April 29 deadline save \$25 off the regular fee of \$260.

Unless you are approved to take the ATCB Examination for licensure in New York, New Mexico, Maryland or Kentucky, the only way to test is by first obtaining the Registered Art Therapist (ATR) credential. If you are not already an ATR, your complete ATR application packet must be received in the ATCB National Office no later than April 1, 2016 if you intend to apply for Board Certification by May 27 and take the ATCBE on July 9. Individuals planning to test for state licensure must be approved to test by their state's licensure board.

For more information, please visit atcb.org/Examinations, or contact the ATCB National Office.

Financial Merits of Credentialing: Mary Ellen McAlevey, MA, ATR-BC, ATCS, ATCB President-elect

According to a 2014 report issued by the United States Census Bureau, full-time workers who have alternative credentials earn more than full-time workers with no credentials (Ewert & Kominski, 2014). Workers with professional certifications and licenses earn the most (ibid).

The Federal Interagency Working Group on Expanded Measures of Enrollment and Attainment (GEMEnA) was formed in 2009 to research measures of alternative credentials. The organization investigates certificates, apprenticeships, and similar forms of “human capital enhancement” which translates into worker productivity (Ewert & Kominski, 2014). The GEMEnA (as cited in Ewert & Kominski, 2014) defines alternative credentials as such:

Certification: A credential awarded by a certification body based on an individual demonstrating through an examination process that he or she has acquired the designated knowledge, skills, and abilities to perform a specific job. The examination can be either written, oral, or performance-based. Certification is a time-limited credential that is renewed through a recertification process.

License: A credential awarded by a licensing agency based on pre-determined criteria. The criteria may include some combination of degree attainment, certifications, certificates, assessment, apprenticeship programs, or work experience. Licenses are time-limited and must be renewed periodically.


Educational Certificate: A credential awarded by a training provider or educational institution based on completion of all requirements for a program of study, including coursework and test or other performance evaluations. Certificates are typically awarded for life (like a degree). Certificates of attendance or participation in a short-term training (e.g., one day) are not in the definitional scope for educational certificates. (Bielick, Cronen, Montaquila, & Roth, 2013, p. 4)

Workers with an associate’s degree or higher hold professional certifications and licenses at a higher concentration than workers without a degree, and workers with a master’s or professional degree hold

professional certifications and licenses at the most concentrated rate. Educational certificates seemed to have the most appeal to workers with an associate’s degree, but this rate was still much lower than a professional certification or license. Workers with a high school degree or less were the least likely to hold any type of alternative credential (Ewert & Kominski, 2014). Much work is involved with earning an alternative credential or certification, but the rewards can pay off.

Adults who held no alternative credential were unemployed at a rate of 84.2%, compared to adults with a professional certification or license (12.6%). “... People working full-time with alternative credentials earned more than those without any alternative credentials, and people with professional certifications and licenses earned the most” (Bielick, Cronen, Montaquila, & Roth, 2013, p. 7).

Workers obtained the professional certification and/or license because it was required for their jobs at a rate of 76.2%, and 93.0% of respondents answered that they took coursework or training to earn the certification and/or license. Ninety-one percent had to demonstrate skills on the job or pass an exam or test to earn the certification and/or license, and 66% have to take periodic exams or earn CEUs for maintenance.

The credentials earned through the Art Therapy Credentials Board are in line with national findings across multiple professions and industries. The Board of Directors of the ATCB invites you to consider these points, as states and educational programs are requiring credentials as the hallmark for professionalism in practice. 

Bielick, S., Cronen, S., Stone, C., Montaquila, J., & Roth, S. (2013). *The Adult Training and Education Survey (ATES) Pilot Study: Technical Report (NCES 2013-190)*, U. S. Department of Education. Washington, D. C.: National Center for Education Statistics, 2013.

Ewert, S., & Kominski, R. (2014, January). *Measuring alternative educational credentials: 2012* (pp.70-138). U.S. Department of Commerce, Economics and Statistics Administration, U.S. Census Bureau. Retrieved from www.census.gov/prod/2014/pubs/p70-138.pdf

CREDENTIAL HOLDER PROFILE **Melissa Walker, ATR**



Melissa Walker, ATR

In February 2015 National Geographic Magazine's cover story, "Healing our Soldiers," hit the newsstand. On the cover Marine Gunnery Sgt. Aaron Tam stood clutching the mask he created in the art therapy treatment program at the National Intrepid Center of Excellence (Walter Reed National Military Medical Center, Bethesda, MD). The mask depicted the result of Aaron's blast injury – the flap of skull

that was removed to alleviate the pressure on his brain, the shrapnel that had penetrated his face. Aaron, like the other service members featured in the cover story, had been my patient.

So how did I get here? My path to art therapy began in the genes of my ancestors – in the hands of my artist grandmother. It began when my grandfather was injured during the Korean War, and met my grandmother, a Red Cross nurse, while he recovered in Japan. It began the moment I read two simple words back-to-back for the very first time: "art" and "therapy."

Art wove its way throughout my childhood and the fortunate proximity of a Magnet Arts high school allowed me to focus on its presence in my life and consider it a potential career path. My art teacher motivated me to pursue studio art and art education in college, and so began my journey to learn to share something so precious to me with others.

My experiences as an undergraduate art student and eventually a student teacher were necessary for many reasons. I honed my own abilities as an artist as well as my ability to guide others. I also discovered during this time that I wanted to understand my students better. I enjoyed working with special needs students most – watching their artistic process with great interest and noticing that they were finding ways to communicate via art. I knew deep down that I needed to look into the art therapy profession about which I was hearing rumors.

During my graduate interview at New York University (NYU), I felt a distinct feeling of excitement

creep into my body, and this feeling remained throughout the two years I spent in the program. It followed me on the streets of New York City (NYC) and gave me the energy necessary to maintain a rigorous work/school/life balance.

While at NYU I began to connect the dots between the psychology of trauma and my own experience with Post-Traumatic Stress Disorder (PTSD). While I did not have PTSD, I quickly realized that my veteran grandfather did. This connection allowed me to focus my thesis around trauma, and cemented my interest in working with that traumatized population after graduate school.



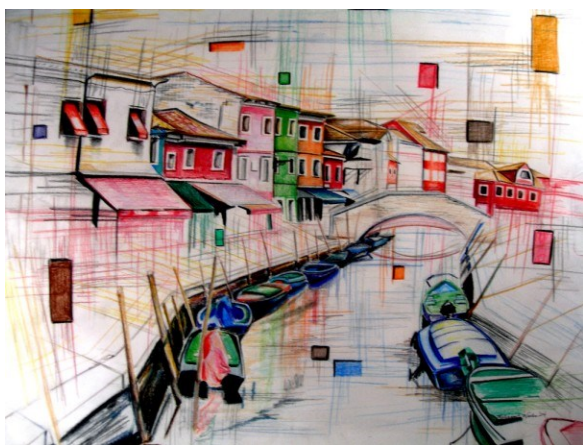
The Bird's Nest: 8" x 10" mixed media

While I loved NYC, I gave myself the flexibility to move wherever the best career opportunity presented itself after graduation. I checked job announcements all over the country incessantly. And one evening while sitting on the porch of my parents' home in Atlanta, I noticed an opening for an art therapist on the inpatient psychiatric unit at Walter Reed Army Medical Center. Having finished my second internship rotation at a similar setting, and because of my familiarity with the effects of war on service members, I knew I needed to apply. While my grandfather had passed away soon after that Psychology of Trauma class and would never have exposure to treatments such as art therapy, I was comforted by *(continued on page 6)*

CREDENTIAL HOLDER PROFILE Melissa Walker, ATR *continued from page 5*

the idea that others could.

Knowing how difficult it is for one's name to be



The Colored Cityscape: 18" x 24" colored pencil

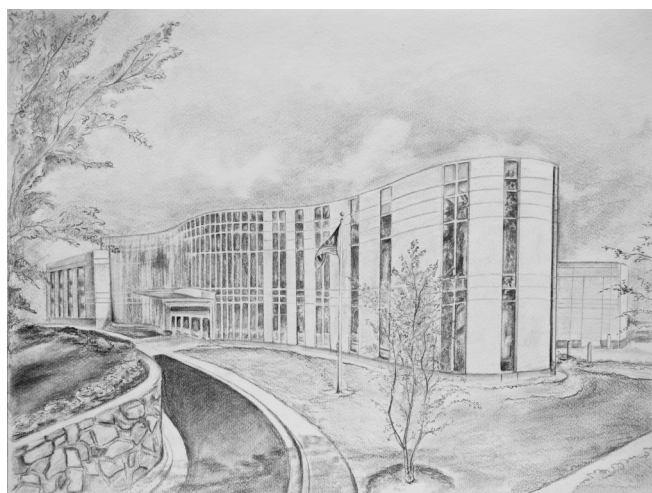
plications via the Department of Defense (DoD) human resource center – I cannot describe the process that followed as anything but serendipitous. Walter Reed wanted to conduct a phone interview, which I promptly turned down. I asked for an in-person interview instead. The airlines cooperated with my need to travel from Atlanta to New York City with a layover in Washington, DC in between, and a few days later I was on my way to the nation's largest military medical hospital – armed with a portfolio, curriculum vitae, writing samples, and carefully thought out answers to potential interview questions.

I walked nervously into the office of the Chief of Inpatient Psychiatry and found the entire treatment team waiting there for me. I blushed as I conversed with the team, obviously a bit "green," and shared with them what I could. When I pulled out my artist's portfolio the Chief held the slides up to the light and studied them intently. The Chief pulled the slides down from his gaze and asked me if I would like a tour of the facility. He took the slides with him, sharing my artwork with staff along the way. Years later he would tell me that a combination of those slides, and the slight shade of red he observed in my face during the interview, led him to hire me right out of graduate school. "The way you blushed indicated that you really cared about getting the job," he said, "and I needed someone who cared."

pulled by computer rating from hundreds, potentially thousands, of ap-

I spent a little over two years on that psychiatric unit, putting to practice all I had learned in graduate school with large (sometimes thirty plus) groups of patients. Because it was a locked inpatient unit, patients were admitted and released as needed, with varying lengths of stay. This required a rather diverse repertoire of art therapy directives, as I tried my best not to repeat a directive too many times for the sake of the longer-term patients. Working on that unit, while chaotic, was fascinating. Active duty service members, veterans, and their dependents were admitted if acutely ill. They often arrived manic or psychotic, and their symptoms readily presented themselves in their artwork. The psychiatrists would carefully decide how to medicate the patients, and as the patients stabilized, their artwork would change as well. Because of this, the team took interest in the art therapy products and began to use the artwork as a way to communicate to the patients that they were improving.

I was not actively looking for a new job when



The drawing of the National Intrepid Center of Excellence (NICoE): 18" x 24" graphite

another DoD art therapy announcement was delivered to my e-mail inbox. But one morning before work, I clicked a link and once again felt the same excitement I had when embarking on my graduate studies. The National Intrepid Center of Excellence (NICoE), a facility for the treatment, research, and education of traumatic brain injury and underlying psychological health conditions, was looking for an art therapist to develop their Healing Arts Program. *(continued on page 7)*

CREDENTIAL HOLDER PROFILE **Melissa Walker, ATR** *continued from page 6*

A few months later, I found myself standing in the brand new studio space dedicated to art therapy at the NICoE. Apparently the glitter from the example masks I had brought in for that interview had remained on the tables of the NICoE interview room, and my new supervisors joked that it was like I had come in and sprinkled my “fairy dust” all over the place. I am thankful that it stayed there and reminded them of me – one of the only times I will be appreciative of the stubborn nature of glitter and the challenges associated with cleaning it up. As I stood in the studio space, I thought of my grandfather and the path that my memories with him had forged. I silently thanked him and then went to work.

Establishing an art therapy program has been the most challenging, rewarding, and worthwhile endeavor of my life. I was able to implement the program at the very early stages of the development of the NICoE model, which meant the freedom to ask for what was needed for the program to be successful. My actual implementation of the program differed from the vision of NICoE leadership, who initially

thought the art therapy would be a complementary addition to the clinical programming of the four-week model. If service members wanted to try art making, they could request it. Soon after I implemented it as a standard of care (every service member to engage in group art therapy and receive one individual art therapy evaluation); however, leadership observed



The Mask: 5.5” x 1.5” x 8” mixed media on paper maché mask

that art therapy was much, much more than what they previously thought. Service members were rating it as one of the most helpful parts of their treatment. They were opening up in ways they had not before. The program soon grew to include music therapy and therapeutic writing via a partnership with the National Endowment for the Arts, and today the Healing Arts Program is one of the hallmarks of

the NICoE model. Expansion has begun into other military treatment facilities and communities, to include the Intrepid Spirits (NICoE Satellites), and the special operations population in Virginia Beach.

A large portion of my career has been dedicated to educating others about, and advocating for, art therapy. I have had countless conversations surrounding the difference between art therapy and art as therapy, and the work done by art therapists ver-



The Black and White Cityscape: 18” x 24” graphite

sus artists-in-residence and artist volunteers. During these conversations, it has been most

helpful to be able to explain the process of becoming a Registered Art Therapist (ATR). There is an immediate understanding of the existence of professional and ethical standards when I mention the Art Therapy Credentials Board. I cannot imagine where I would be without being able to display “ATR” after my name. Those three letters are symbolic of the hard work we have put into becoming properly educated, safely practicing, and life-changing therapists.

As I write this profile, I celebrate exactly seven years with the DoD – to the day! This means seven years as a practicing art therapist. It is a culmination of all of those life events I shared with you as well as a testament to the need for and existence of art therapists in our military medical system, and subsequently, society. Seven years of working towards, and then working under, the auspices of the ATR credential that the Art Therapy Credentials Board has felt confident enough to bestow upon me. What an honor it has been to represent the ATCB, the art therapy profession, and my fellow art therapy colleagues. What a gift to have the opportunity to help service members like my grandfather. Thank you, and here’s to the next seven years. *✂*

ATCB marks the Fifth Year Anniversary of the Art Therapy Certified Supervisor (ATCS) Credential

In 2010, the ATCB launched a new credential – Art Therapy Certified Supervisor (ATCS) – for those ATR-BCs who demonstrate substantial supervision qualifications including competency in the theories and practices of art therapy supervision. During the past five years, the number of ATCSs has grown to 66 with the five newly credentialed supervisors listed in this newsletter. ATCSs now reside in 20 states, Canada, and South Korea.

United States

Alabama
California
Connecticut
Florida
Georgia
Maryland
Massachusetts
Mississippi
New Jersey
New Mexico
New York
Ohio
Oklahoma
Oregon
Pennsylvania
Texas
Utah
Vermont
Virginia
Washington

Ontario, Canada South Korea

For more information on requirements for the ATCS, to download an application, or locate an ATCS near you, please visit the ATCB website at atcb.org, or call the ATCB National Office. ☎



child's school, or you have volunteered with a local non-profit organization. If you have, you have probably felt the elation of being part of a community that has a vision and a purpose. But, what about service to art therapy? Have you wondered how you can make a difference to your profession? The ATCB has a number of volunteer opportunities. We asked Heidi Law, Chair of the Certification Committee and Mindi Rojas, Chair of the Registration Standards Committee why they decided to take the plunge and what it has meant to them to serve. Here's what they said:

Q: What prompted you to decide to serve on an ATCB committee?

HL: Initially I was encouraged by a past supervisor, Diane Meros. Diane shared with me how gratifying the experience was for her. I was inspired by her persistent contribution to the field of art therapy. I was curious about what it would be like to serve and I wanted to help the profession so more people could receive excellent service. I loved art therapy and I still do. I wanted to promote this beautiful process.

MR: When I was approached about my interest in serving on an ATCB committee, I was excited about the possibility of working on the national level. I also felt it would be a great way to contribute to and promote the field of art therapy.

Q: What has been your greatest challenge in serving?

HL: My greatest challenge in serving initially was learning how everything works. I was well prepared in academics, but there were a lot of experiences I had not had outside of that realm. As a committee member, I began to travel for meetings. I had never taken any kind of taxi and had only flown on a plane one time when I was 8 years old. I also didn't know the procedures related to these meetings, specific forms of writing, or some professional etiquette such as who does which tasks. Thinking back, this experience has been exciting and fun and I can't believe how much I have learned.

MR: Initially, I found it somewhat challenging to add to the work I was doing at the time. Serving on a committee does take a level of commitment and time. Fortunately, the ATCB is wonderful about providing ample time for *(continued on page 9)*

Why Serve on an ATCB Committee? An Interview with Two Committee Chairs

Have you ever thought of serving on a committee? Maybe you have felt a calling to help the PTA at your

Why Serve on an ATCB Committee? An Interview with Two Committee Chairs

(continued from page 8) committees to review the issues and questions presented. With time and experience, I was able to successfully find a healthy balance.

Q: What has been your greatest reward?

HL: The greatest reward for me has been developing relationships. Over the years, I've met people from all over the country. I've learned some of the ins and outs of the differences between art therapy in various states. And as the years have progressed I've known committee members through marriages, pregnancies, losses, deaths, and grandchildren. My art therapy family has grown and I am very grateful for this.

MR: My work on the RSC has afforded me the opportunity to learn about current issues pertaining to our field. It has been a fulfilling and enriching experience to work with art therapists in different states. I was able to gain an understanding of the way in which art therapists work in communities other than my own. I have enjoyed hearing multiple perspectives regarding the issues the RSC researches and discusses.

Q: You are now chair of your committee. How has that changed you?

HL: This is my first year as committee chair. Becoming a committee chair has pushed me further to understand the big picture, to watch for committee member needs and strengths, and to assist the group in having a cohesive work flow. Since there is an overlap in the tasks and approach of committee chair and clinical supervisor, the transition to committee chair was relatively smooth. I am taking the lead while I am aware I will always be learning.


MR: My promotion to Chair of the RSC was one I felt very grateful to attain. I enjoyed working on the committee as a member and felt I had the experience needed to successfully Chair the committee. As Chair, I was able to expand my leadership skills. I have been fortunate to have a wonderful group of committee members who have made valuable contributions to our research and discussions, making my role as Chair productive and enjoyable.

Q: What advice, words of wisdom and/or encouragement do you have for someone contemplating the step of serving on a committee?

HL: I've often met people who have a passion for art therapy and are skilled but don't fully understand their gifts. If you've received feedback from your supervisors and colleagues that you have the skills for this role and you know you have the interest in contributing to the field above and beyond your typical work week, I recommend you go for it.

MR: I encourage those who are interested to strongly consider serving on a committee. I believe it is an enriching experience that provides opportunities to broaden knowledge and professional connections in our field. As I reflect on the last five years working with the RSC, I feel rewarded by and proud of all that we were able to accomplish.

Heidi Larew, ATR-BC, ATCS, LPCC-S, LICDC-CS, ACS, NCC, enjoys using art to help the people she meets find hope and meaning. Her specialization as an art therapist is in clinical supervision and education. Heidi teaches an internship class at Ursuline College, leads a post-graduate clinical supervision group, and provides dialectical behavior therapy at Akron General Medical Center. She is in the process of completing her Ph.D. in Counselor Education and Supervision. Additionally, she works in private practice, provides clinical pastoral counseling, and writes for the Buckeye Art Therapy Association newsletter, *The Palette*.

Mindi Rojas, MS, ATR-BC, is a Board Certified Art Therapist. She received a master's degree in art therapy from Florida State University. Mindi has experience providing clinical art therapy services in the areas of psychiatric mental and behavioral health, substance abuse, trauma, anticipatory grief, and bereavement. She has facilitated individual, group, couples and family art therapy sessions. Mindi has presented on various topics in art therapy including art therapy and trauma, PTSD, music and art therapy, and family art therapy. Mindi also currently provides supervision to art therapists working to attain the ATR. 

VOLUNTEER

Congratulations to Our New Credential Holders

May 1, 2015 to August 31, 2015

New ATCSs

Rita Klachkin
Malissa Morrell
Diane Quiroga
Mary Roberts
Kim Traina-Nolan

New ATR-BCs

Kimberly Adams
Kamila Agi-Mejias
Robyn Alliah
Bethany Altschwager
Sara Baicich
Traci Bitondo-Stenavage
Deborah Brass
Justine Brechue
Samantha Brophy
Rebecca Butler
Kelly Cahill Roberts
Francesca Cangeloso
Margaret Carlson
Erin Carter
Mary Cash
Nora Cassar
Laura Chamberlin
Jill Chiciak
Stephanie Clemmons
Natashia Collins
Carrie Cottone
Christine Creighton
Brenda Cunningham
Erendira Dao
Justin Davis
Kristina Diaz
Erin Dolan
Jessica Drass
Delaine Due
Kirsten Eby
Robin Epley
Rose Fawcett
Rhonda Fessel
Adrienne Figueiredo
Jana Fink
Frank Florence
Keshia Francis
Ariella Freiden

New ATR-BCs (cont.)

Deborah Fung
Kaitlin Gibson
Justine Girard
Sophie Green
Samantha Gregory
Lara Haagen
Eleanor Hagert
Samantha Halpin
Tara Harding
Beth Henson
Erica Heusser
Anne Holscher
Mary Howe
Katherine Kamholz
Alexandra Koegel
Erin Kompf
Rachel Kreisler
Adrienne Kurzawa
Jessica LaBarca
Beverly Labrie
Sydney Lawson
Amanda Lightner
Virginia Livingston
Sarah Manley
Courtney Martin
Heather Matson
Andelae McCoy
Casey McDermott
Melissa McFall
Mandee McKelvey
Whitney McLean
Elizabeth Meals
Rajesh Mehra
Jean Melconian
Emily Mertz
Lucia Militello
Rebecca Miller
Anna O'Brien
Suzanne Otter
Beth Patane
Jennifer Perez
Jamie Peterson
Emily Popiel
Katrina Reale
Theresa Reed

New ATR-BCs (cont.)

Rebecca Rose
Janice Rose
Rachel Ryan
Natalie Sadar
Shelby Sallade
Devon Schlegel
Pamela Schwartz
Jenea Scott
Shazia Siddiqi
Leanne Sim
Jewelie Sluzas
Sarah Snowden
Kaitlin Staples
Natalie Steciuk
Kassie Straker
Alix Sugarman
Rachel Taylor Martin
Lauren Theiss
Alison Trainor Cello
Laura Vincent-Arnold
Donnetta Watson
Patricia Weaver Kennedy
Devora Weinapple
Cynthia Wilson
Nicole Witt
Denise Wolf
New ATRs
Elizabeth Aldag
Mary Alleyne
Bethany Altschwager
Victoria Beck
Deborah Brass
Dawn Burau
Tara Burke
Francesca Cangeloso
Deborah Carl
Margaret Carlson
Abigail Carter
Marie Caruso-Teresi
Melissa Castillo
Nancy Choe
Rachel Cimino
Melissa Clarke
Julia Davis
Erin Davis

New ATRs (continued)

Lena Deleo
Kristina Diaz
Kirsten Dilling
Hope Dixon
Cassie Dobbs
Shawna Doriot
Jessica Drass
Sarah Dunn
Kirsten Eby
Jessica Edelstein
Harriet Ellner
Jeanna Fearon
Emilie Ferran
Leah Floyd
Keshia Francis
Sarah Frank
Sarah Gauthier
Jamie Giannotti
Justine Girard
Ayelet Goldstein
Sigal Govrin
Jennifer Graham
Melinda Hallenbeck-Kostecky
Senona Haugenater
Melanie Heindl
Amy Hill
Ashley Hill
Anne Holscher
Christina Hom
Eliza Homer
Caitlin Iannucci
LeeAnn Jackson
Nicole Jaffe
Jacqueline Jones
Danielle Jweid
Maureen Kelleher
Autumn Kern
Jaana Kilkki
Elizabeth Kim
Alexandra Koegel
Jessica Koppen
Heather Kosch
Sarah Kulig
Katrina Kurtz

New ATRs (continued)

Cara Langevin
Andrea Laucella
Sue Lee
Salina Loriaux
Ashley Lyon
Michele Maletta-Spiegel
Leeanna Mantica
Susan Marlow
Shannon Marone
Courtney Martin
Casey McDermott
Amanda McGovern
Rajesh Mehra
Jean Melconian
Jacqueline Metcalfe
Laura Miles
Chaehyun Min
Danielle Minkin
Vickie Morgan
Alison Myers
Juliana Natiello
Susan New
Anna O'Brien
Alana Owens
Abigail Oxford
Hae Jin Park
Shelby Pelletier
Candis Perlman
Brittany Peterson
Brandy Prabucki
Katrina Reale
Samantha Reis
Nephthys Resurreccion
Rebecca Roberts-Kerns
Ashley Rogols
Sonja Rohde
Janice Rose
Kara Rothschild
Sophia Saad
Yukie Sagawa
Katelyn Sakulich
Yasmine Sasannejad
Rachel Schreiberman
Jenea Scott
Lindsey Semliatschenko
Kathleen Simpson

New ATRs (continued)

Antonia Sloan
Lauren Smith
Natalie Steciuk
Molly Sutton
Katherine Taricska
Alison Trainor Cello
Elizabeth VanDerMolen
Leah Weinraub
Jaynice Williams
Meghan Wnorowski-Bogle
Salicia Young
Jacqueline Yurik
Elise Zigrossi
Elena Zuniga



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Thank you!



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From left to right: Mary Ellen McAlevey, Robin Colburn and Erin Clark

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