

URI GENDER & SEXUALITY CENTER VOLUNTEER APPLICATION

VOLUNTEER APPLICANT INFORMATION

Full Name:

Date:

Pronouns: He/Him/His She/Her/Hers They/Them/Theirs Ze/Hir/Hirs / /

Major(s) (if applicable):

Email:

Minor(s) (if applicable):

Cell Phone Number:

Affiliation with URI:

Student:

- | | |
|--------------------------------------|-------------------------------------------|
| <input type="checkbox"/> First Year | <input type="checkbox"/> Alumni |
| <input type="checkbox"/> Second Year | <input type="checkbox"/> Faculty |
| <input type="checkbox"/> Third Year | <input type="checkbox"/> Staff |
| <input type="checkbox"/> Fourth Year | <input type="checkbox"/> Community Member |
| <input type="checkbox"/> Graduate | <input type="checkbox"/> |

Address/
Res. Hall:

Have transportation?

Yes No

Mode of
Transportation:

- Walk
 Drive
 Bus

AREA OF INTEREST (WRITE ONE OR MORE IN BOX BELOW)

Assist with programs and events:

- Safe Zone Blitz week (Sept 26-30th, 2022)
 LGBTQ+ Liberation Month Ft. Sex Fest (October 2022)
 Trans Awareness Week (November 14th-18th)
 Safe Zone Blitz (February 13th-17th, 2023)
 QTPOC Black History Month Gala
 The Gender & Sexuality Symposium (March 27th-31st, 2023)
 Lavender Graduation (April 18th- 20th)
 Summer Events (Barbequeer, South County Pride, etc.)

- Fundraising
 Table/ Booth Events
 Trans Inclusion Committee
 Student Advisory Board

Interest(s):

REASONS YOU WANT TO BE A VOLUNTEER

How did you hear about the Volunteer Program at the URI Gender & Sexuality Center?

How have you been involved with the URI Gender & Sexuality Center?

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What are your goals for a volunteer position with the URI Gender & Sexuality Center?

What are your ideas for programs and services at the URI Gender & Sexuality Center?

What can the URI Gender & Sexuality Center do to improve programs and/or services?

KNOWLEDGE ABOUT LGBTQ COMMUNITY

Are you a Safe Zone Project Member? A facilitator?

Please describe your experience working with LGBTQ+ Community.

Please indicate which of your identities are most important to you and why:

ADDITIONAL INFORMATION

Other jobs:

Certifications:

Languages Spoken:

Computer Skills:

Presentation Skills:

Other:

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REFERENCES

Name:

Relationship:

Phone/Email:

Name:

Relationship:

Phone/Email:

AVAILABILITY

Days And Times:

SIGNATURES

I authorize the verification of the information provided on this form for my volunteer application. I will contact URI Gender & Sexuality Center Staff if there are any changes to this form and/or my interest or availability.

Signature of applicant:

Date:

Signature of G&S Center Staff Member:

Date: