

Stonewall Youth



### Application for Board Membership

NAME \_\_\_\_\_ HOME PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ WORK PHONE \_\_\_\_\_

\_\_\_\_\_ FAX \_\_\_\_\_

OCCUPATION \_\_\_\_\_ EMPLOYER \_\_\_\_\_

HOW DID YOU HEAR ABOUT STONEWALL YOUTH'S BOARD OPPORTUNITY?

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DESCRIBE ANY INVOLVEMENT YOU HAVE HAD WITH STONEWALL YOUTH  
(VOLUNTEER OR OTHER)

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DO YOU KNOW ANY OF THE PRESENT BOARD MEMBERS? IF SO, PLEASE  
DESCRIBE ANY WORK YOU HAVE DONE WITH THEM.

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WHAT DO YOU HOPE TO GAIN PERSONALLY THROUGH YOUR  
INVOLVEMENT WITH STONEWALL YOUTH?

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WE ASK BOARD MEMBERS TO COMMIT TO 2 YEARS AT 10 HOURS/MONTH.  
DOES THIS WORK FOR YOU? \_\_\_\_\_

WE ALSO ASK BOARD MEMBERS TO UNDERTAKE AT LEAST ONE  
FUNDRAISING PROJECT A YEAR, WHERE YOU ARE THE MAIN PERSON  
WORKING ON IT. DURING THIS TIME MORE HOURS MAY BE REQUIRED.  
ARE YOU STILL WITH US? \_\_\_\_\_ IF YES, KEEP GOING

WHAT EXPERIENCE DO YOU HAVE WITH BI, GAY, LESBIAN AND TRANS  
YOUTH ISSUES? WHAT EXPERIENCE DO YOU HAVE WORKING ON OR WITH  
BOARDS OF DIRECTORS OF NONPROFIT ORGANIZATIONS?

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WHAT EXPERIENCE DO YOU HAVE WITH GROUP DECISION MAKING,  
ESPECIALLY CONSENSUS DECISIONS?

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PLEASE LIST ANY COMMUNITY AFFILIATIONS \_\_\_\_\_

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WE ARE WORKING TOWARD QUEER YOUTH LIBERATION IN ALL ITS  
FORMS. WHAT IS YOUR EXPERIENCE/ COMMITMENT WORKING ON, OR  
NEED FOR TRAINING IN THE FOLLOWING AREAS:

UNDOING RACISM:

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(dis)ABILITY AWARENESS:

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YOUTH LEADERSHIP/ANTI-AGEISM

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ENDING SEXISM

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UNDERSTANDING CLASS OPPRESSION

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Based on the information you have been given about standing committee involvement, Board responsibilities, philosophies, and the purpose of Stonewall Youth, if you are willing to serve as a Stonewall Youth Board Member, please sign below and mail to P.O. Box 7383, Olympia, WA 98507. Please feel free to call and leave a message requesting additional information: 705-2738.

\_\_\_\_\_ Date \_\_\_\_\_