

Chancellor's Advisory Committee on Gender Identity and Sexual Orientation Issues (GISOI)

Membership Application/Statement of Interest

Name: _____ Application Date: _____

Title: _____ Department: _____

Status (please indicate): Faculty Staff PostDoc Graduate Student Undergraduate

Phone: _____ Fax: _____

Email: _____ Mail code: _____

Explain briefly why you want to become a GISOI Member:

What skills and experiences would you bring to this committee? How have you used these effectively in the past?

Is there anything else you would like to share with the selection committee?