2009

Call for Papers for The 15th Annual University of Rhode Island Symposium on Gay, Lesbian, Bisexual, Transgender, Intersex, Queer and Questioning Issues

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15th Annual Symposium on Gay Lesbian Bisexual Transgender Intersex Queer and Questioning Issues

Call for Papers and Programs

The Annual URI GLBTIQQ Symposium affords an exciting opportunity for the presentation and discussion of issues important to GLBTIQQ people and their communities including diverse social, gender, sexual, racial, ethnic, historical, and legal perspectives.

Program proposals are encouraged from academic, creative, political, and activist traditions. Presentations are welcome as applied workshops, media formats, artistic performances, exhibits and panel discussions.

Submission Deadline
December 15, 2008

Applications available at http://www.uri.edu/glbt

For Additional Information Contact:

Andrew Winters
Assistant to the Vice President for Student Affairs
GLBT Programs and Services
112 Roger Williams Building
18 Butterfield Road
Kingston, RI 02881
Phone: 401-874-2894
E-mail: Andrew@uri.edu
APPLICATION FORM

15th Annual Symposium on Gay Lesbian Bisexual Transgender Intersex Queer and Questioning Issues

April 1 – 4, 2009
University of Rhode Island
Kingston, RI 02881

To assist us in organizing our Symposium, carefully complete this form. Your information will help us evaluate your proposal and meet your presentation needs. Please type or print neatly. Incomplete proposals will not be considered.

We prefer E-mail submissions to GLBT@etal.uri.edu

Proposals may also be mailed to:
Andrew Winters
Assistant to the Vice President for Student Affairs – GLBT Programs and Services
112 Roger Williams Building
18 Butterfield Road, URI
Kingston, RI 02881
If you need to reach us, call 401-874-2894

Note: If you need more space for any question, please attach your response to this form. Write "attached" in the space below the appropriate question.

1. TITLE OF SESSION: (limit of 15 words – should be descriptive of content)

2. WRITE A BRIEF DESCRIPTION OF YOUR PROGRAM(S) FOR BROCHURE: (limit of 50 words)
3. **PROGRAM OUTLINE/ABSTRACT:** (Please limit to 300 - 500 words)

4. **PRESENTER INFORMATION:** Summary of qualifications of speaker(s) for presenting this topic. Include 4-5 sentences that will be used by the moderator to introduce you to the audience.

5. **SPEAKERS:** Please provide the following information for each person presenting. (You may attach information for additional speakers as needed.)

   Contact Name:
   
   Title:
   
   Agency/Employer:
   
   Mailing Address:
   
   City:
   
   State:
   
   Zip:
   
   Email:
   
   Work Phone: (   )
   
   Home Phone: (   )
   
   Fax: (   )
6. MODE/SET-UP FOR PRESENTATION: (Check all that apply)

   ____ Lecture ____ Discussion ____ Demonstration ____ Panel
   ____ Activity/Participation ____ Performance ____ Visual Display ____ Other, be specific:

7. AUDIO-VISUAL NEEDS: (Check all that apply.)

   ____ TV/VCR combo (27" screen) ____ Overhead Projector ____ Screen
   ____ Slide Projector ____ Data/Video projector onto Screen
   ____ Other, be specific:

   Note: A lectern, microphone, and table with chairs are provided. Although the data/video projector is available upon request, laptops must be provided by user.

8. ROOM ARRANGEMENT PREFERRED: (Check one, room arrangement not guaranteed)

   ____ Theater Style ____ Semi-circle ____ Tables ____ Open Activity, chairs on perimeter
   ____ Other, be specific:

9. TIME REQUIREMENT: Presentations are typically 50 minutes in length. If you need additional time, please indicate desired length.

   ____ 50 Minutes
   ____ Other, be specific:

10. ADDITIONAL REQUESTS/SPECIAL NEEDS:

   -- Thank You! --