

**SUA Conference Application:** (please select those for which you are interested in attending)  
\_\_\_ 2009 Student of Color Conference: UC San Diego November 13-15<sup>th</sup>

**Contact Information**

Name:

Street Address:

City ST ZIP Code:

Home Phone:

Cell Phone:

E-Mail Address:

Dietary Needs: \_\_\_\_\_

Year:

Student ID:

College:

Major:

**We would like to make this delegation as diverse as possible—how do you identify? check all, if any, that apply.**

African American/Black

Chican@/o

Native American

Asian American

Latin@/o

White/Euro American

Pacific Islander

Middle Eastern Descent

Queer/GLBTI

Veteran

Transfer Student

Non-Traditional Student

Working Class

Womyn

First Generation

Other

Jewish

**Goals for the Conferences**

Please explain why you want to attend the conference(s), what you hope to gain personally from the conference(s), and what you plan on bringing back to campus from the conference(s)

**Other**

Specify an issue that is most important to you? How will this conference help you address that particular issue?

**Previous Organizing/Involvement/Leadership Experience**

Summarize your previous organizing/involvement/leadership experience (UCSC, high school, or community based).

**Person to Notify in Case of Emergency**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City ST ZIP Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

**Driver Information**

Please check any of the following that apply to you.

At least 21, and licensed to drive in California

At least 18, licensed to drive in California, and have a car with proof of insurance

**Agreement and Signature**

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a UC Santa Cruz delegate, I will participate fully in any and all activities, and if I fail to do so I understand I will be held accountable to specific conference guidelines signed prior to my departure. I agree to attend the conference in full (coherently) including, but not limited to, all workshops, lobby visits, regional breakouts, and delegation meetings. If selected, I agree to attend one of the delegation meetings. I understand that **October 21<sup>st</sup>** will be the last day to drop attendance if selected, in order to avoid paying a minimum fee of \$150.

Name (printed): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Our Policy**

*It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. Thank you for completing this application form and for your interest.*

Applications due **Friday October 16<sup>th</sup> by 5pm** to the SUA Office (**Victor's Box** ) or Website (when available)

Please know that you are responsible for attending the conference in full and not attending or not following conference conduct could result in you losing SUA funding for registration fees, travel, and lodging.