

## **ERA Reunion – June 15, 2019**

Contact: [pioneerhistories@veteranfeministsofamerica.org](mailto:pioneerhistories@veteranfeministsofamerica.org)

### **Bio Form**

#### ***Biographical Information***

Name \_\_\_\_\_  
First Middle Last Maiden Alt. Name

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_  
City State Zip

Telephone \_\_\_\_\_  
Home Cell

Email \_\_\_\_\_

#### ***Background Information***

Birth year \_\_\_\_\_ Place of Birth \_\_\_\_\_

Where did you grow up? \_\_\_\_\_

Cultural Background (Include class, race/ethnicity and religion if applicable.)

\_\_\_\_\_

Gender/Sexual Identification \_\_\_\_\_

Educational Background (List schools/dates/degrees and courses of study if applicable) \_\_\_\_\_

\_\_\_\_\_

Work Experiences (List dates and primary responsibilities) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Family/Children (If you have children, please list their names and year of birth)

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\_\_\_\_\_