



**Women of Color Network (WOCN)  
Enhancing Leadership, Impacting Communities:  
National Leadership Institute  
For Advocates Serving Battered Women of Color  
August 6-8, 2008 • New Orleans, LA**

**REGISTRATION FORM FOR NON OVW-FUNDED  
COMMUNITY-BASED ADVOCATES**

WOCN is pleased to announce that we will pay travel and lodging for 10 community-based advocates to join 40 OVW grantees in attendance at the National Leadership Institute for Advocates Serving Battered Women of Color. The criteria for selecting the 10 advocates are as follows:

- 1) **Selections will be made on a regional basis. The Midwest, East, South and West regions will each receive 2 slots, and Alaska, Hawaii and the US Territories will share two slots.**
- 2) **The 10 advocates must work at an organization that is not currently receiving OVW funds.**
- 3) **Priority will be given to advocates of color in direct service positions seeking to organize a cultural response, develop and enhance their leadership skills, and develop peer support systems.**
- 4) **Priority will also be given to those who agree to participate in the 2008 WOCN Mentor Track during the Institute and to serve as a WOCN Mentor for at least 18-months thereafter.**

Due to limited space, registration forms will be reviewed on a first-come, first-served basis within each region. If you have any questions, contact Jody Rogers, WOCN Project Assistant, at 800-537-2238, ext 142.

*Please print or type clearly. Attendee lists and name badges will also be made from these forms*

**General Information**

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

Organization: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Region: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

**Organizational Information:** (please answer each question)

1. Does your organization receive OVW funds? Yes or No

2. Are you a direct service advocate? Yes or No

If yes, please give a detailed description of you role:

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If no, what is your current role in the organization?

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3. Would you be interested in becoming a Mentor for WOCN? Yes or No

If so, will you agree to participate in the Mentor track during the 2008 Training Institute? Yes or No

If so, would you be willing to serve as a Mentor for at least 18 months, thereafter? Yes or No

4. What skills, knowledge and expertise can you offer that would be beneficial to the WOCN Mentor Project?

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The registration deadline is **Monday, June 1, 2008**. Please **fax** all registration forms by this date, if registration forms are not received on or before the designated deadline, your registration form will not be accepted, no exceptions. Forms can also be mailed, faxed or emailed to the following:

**Jody Rogers, Project Assistant, Women of Color Network**  
**6400 Flank Drive, Suite 1300, Harrisburg, PA 17112**  
**Tel: (800) 537-2238, X142 Fax: (717) 545-9456**  
**E-mail: [jr@pcadv.org](mailto:jr@pcadv.org)**

**Please do not make any arrangements to attend until *you have received confirmation of your attendance from WOCN*. At that time WOCN will gather logistics for your travel and make the arrangements for you.**

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