

# ATTENTION- PIONEERS OF THE SECOND WAVE OF THE WOMEN'S MOVEMENT ACTIVE BETWEEN 1963-1975

*You played an historic role in the great feminist movement that is changing the world.*

*Make sure your contributions are not forgotten by filling out this questionnaire.*

All early participants in the Second Wave Women's Movement are invited to be included in a definitive reference work documenting our activities and achievements. Your biography will consist of your first-hand account of what you did, where and when, for reference and research by historians, teachers, journalists, librarians, ourselves, our sisters, our families and generations that follow us. We shall not be forgotten.

The project is being coordinated by Barbara Love and Ginny Watkins, board members of Veteran Feminists of America, an organization made up of Second Wave Feminists. The information will be entered into a searchable database and made accessible to the public for research in cooperation with the *Sophia Smith Collection* at Smith College. A printed volume of this directory is also planned.

The biographical questionnaire that follows is also available online at the VFA website: [www.vfa.us](http://www.vfa.us)

Please fill out the following questionnaire and return to the address shown at left. Attach extra sheets if needed. Please follow informational format.

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Please print clearly.

1. \_\_\_\_\_  
FIRST NAME MIDDLE NAME  
\_\_\_\_\_  
LAST NAME

2. Your name from 1963 - 1975, if different from  
above: \_\_\_\_\_  
\_\_\_\_\_

The following information (questions 3-7) is for contact purposes only: *not* for publication in the directory.

3. Current address:  
\_\_\_\_\_  
STREET  
\_\_\_\_\_  
CITY ZIP

4. Home phone number: (\_\_\_\_\_) \_\_\_\_\_

5. Office phone number: (\_\_\_\_\_) \_\_\_\_\_

6. Fax number: (\_\_\_\_\_) \_\_\_\_\_

7. E-mail address: \_\_\_\_\_

8. What year did you enter the Women's Movement?  
\_\_\_\_\_ (*Entry date must be 1975 or earlier to qualify for inclusion in this Directory.* If you meet this requirement, please include your contributions up to the present.)

9. **PLEASE SHARE YOUR MOST SIGNIFICANT CONTRIBUTIONS TO THE WOMEN'S MOVEMENT BELOW.** In narrative form, please tell us what you did, including names of organizations, dates and places, whenever possible. Also include feminist writings, art, music or any other feminist contribution. Please ***do not send only*** a resume without a personal statement.

10. Please check only the boxes below that reflect your primary contributions for which you are providing supporting details in question 19:

- The Arts (Art, Music, Film)
- Child Care
- Communications/Media
- Education
- Employment/Labor
- Equal Rights Amendment
- Feminist Organization
- Finance/Economic Justice
- Government/Public Service
- Health
- International
- Legal
- Legislation
- Lesbian Issues
- Marriage/Divorce
- Minority Rights
- Older Women
- Poverty
- Reproductive Rights
- Religion
- Sexuality
- Sports
- Theory
- Violence Against Women
- Other: \_\_\_\_\_

PLEASE SPECIFY

11. If you were ever active in another political movement, which one(s)? (civil rights, peace, environmental, labor, etc.) Please share your experiences.

12. If you have donated or are planning to donate your papers to an archive, please name the archive:

\_\_\_\_\_  
ARCHIVE:

\_\_\_\_\_  
STREET NAME

\_\_\_\_\_  
CITY

\_\_\_\_\_  
ZIP

**OPTIONAL**

13. Date of Birth: \_\_\_\_\_

CITY

STATE

14. Place of Birth: \_\_\_\_\_

CITY

STATE

15. Spouse or Partner:

\_\_\_\_\_  
NAME

16. Children's Name(s):

\_\_\_\_\_  
NAME

\_\_\_\_\_  
NAME

17. Education: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

18. Occupation: \_\_\_\_\_

\_\_\_\_\_

19. Race: \_\_\_\_\_

\_\_\_\_\_

20. Religion: \_\_\_\_\_

\_\_\_\_\_

21. Please help us make this directory as complete as possible. List contact information of others who should be included in this Directory. This help is critical to the success of this project, which relies primarily on networking.

\_\_\_\_\_  
NAME

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY/STATE

\_\_\_\_\_  
TELEPHONE

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E-MAIL

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CITY/STATE

\_\_\_\_\_  
TELEPHONE

\_\_\_\_\_  
E-MAIL

22. Please provide information on any dead feminist leaders who should be in the directory to ensure their place in history. Include dates of birth and death, major contributions and other information called for in this questionnaire that you can provide.

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I hereby give non-exclusive rights for use of the above information in the *The Women's Movement: Pioneers of the Second Wave 1963-1975* project and other Veteran Feminists of America projects.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

We reserve the right to edit your submission.

Please make copies of this questionnaire and distribute it to others, or refer them to VFA web site: [www.vfa.us](http://www.vfa.us)

When you have completed this questionnaire, please mail it to:

Barbara Love, Editor  
82 Deer Hill Ave.  
Danbury, CT 06810

For further information, please contact:

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