



OKSA Lived Expert Leadership Team Application

Once you've completed the application, send to oksaevents@ou.edu by October 29, 2026

Legal Name:

Preferred Name:

DOB:

Age:

Address:

City, State ZIP:

Phone Number:

Email:

Preferred Contact Method: Select One

Alternate Contact Person (Name and Contact Information):

Best Time to Reach You—Day of the Week (check all that apply):

☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday

Time(s) of day:

How did you hear about OKSA?

Are you currently enrolled in a tribe? Select One

If yes, what is your tribal affiliation?

Highest level of education: Select One

Comments:

Employment: Select One

Comments:

What is your primary source of transportation? Select One

Is your transportation reliable? Select One

Comments:

If you have anything you'd like us to know about your availability to attend virtual meetings, like concerns about technology access (e.g. Wi-Fi connectivity, no computer, etc.), please let us know in the box below.

What are the three most important foster care issues to you? If you could work on one thing to change, what would it be?

Please tell us a bit about yourself! (How do you spend your time, what do you do for fun? Work? School?)

Imaging you are working with others to solve a big problem. What role would you typically play? (Select up to 3)

- | | | |
|---|---|---|
| ☐ Public speaker | ☐ Project planner | ☐ Reasearcher |
| ☐ Write/blogger/vlogger | ☐ Project leader | ☐ Advocate/activist |
| ☐ Graphic designer/visual communicator | ☐ Startup thinker/brainstormer | ☐ Analyst |
| ☐ Community organizer | ☐ Fundraiser | ☐ Networker/collaborator |

What skills or previous experiences make you an excellent candidate for the OKSA Lived Expert Leadership Team?

Briefly explain why you would like to serve as a member of the OKSA Lived Expert Leadership Team. (300 word count maximum)

Is there any other relevant information you would like to share?

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