



Statement of Agreement: Use of Materials from Out & Equal Workplace Advocates

I, _____ (print name), having attended an eight-hour train-the-trainer workshop, will receive an invitation to join the Trainer's Network where the PowerPoint slides and training materials for LGBT Diversity Leadership program in your workplace.

I further acknowledge that the contents of this training program are not to be shared or sold, and that all materials, whether in print or electronic form, are the property of Out & Equal Workplace Advocates, and may not be used for any purpose other than facilitating a discussion.

Check Primary interest:

1. Information Only
I may share this information informally with others in my workplace as we discuss diversity. I understand that I do not receive compensation from Out & Equal Workplace Advocates for these discussions. In all discussions, I will clarify that I am using Out & Equal Workplace Advocates materials and that I am not a representative of Out & Equal Workplace Advocates. I will obtain updates on the material from the Out & Equal Trainer's Network prior to discussing the material.

2. Facilitator
I may facilitate 90-minute LGBT Diversity in the Workplace discussions **ONLY** within my organization or company. I understand that I do not receive compensation from Out & Equal Workplace Advocates for facilitation these discussions. In all discussions, I will clarify that I am using Out & Equal Workplace Advocates materials and that I am not a representative of Out & Equal Workplace Advocates. I will obtain updates on the material from the Out & Equal Trainer's Network prior to presenting the material. I will report any presentations quarterly to Out & Equal with the date and number of attendees.

3. I am interested in being an O&E Trainer (fill out contact information below)

The train-the-trainer workshop qualifies me to facilitate the above for the next two years until October 31, 2012. After that date, I may attend another train-the-trainer workshop to renew my qualifications.

Signature: _____ Date: _____

Out & Equal Staff Member Print name: _____

Signature: _____ Date: _____

Interested in becoming a Certified Trainer?

Please provide your contact information, so that we can discuss further training opportunities necessary to becoming certified.

Address: _____

Phone: _____

Email: _____