

# LGBT CENTER OF CENTRAL PA HISTORY PROJECT

## INTERVIEW PROMPTS

My name is \_\_\_\_\_ and I am here with \_\_\_\_\_, who is our videographer, and we are here on behalf of the LGBT Center of Central Pennsylvania History Project. Today's date is \_\_\_\_\_, and we are here for an oral history interview with \_\_\_\_\_. This interview is taking place at \_\_\_\_\_, do we have your permission to record this interview today? We have a consent form for you to read over and sign at the end of the interview.

## TOPICS

\_\_\_\_\_ Please say and spell your full name.

\_\_\_\_\_ What is your date of birth and where were you born?

\_\_\_\_\_ Family of Origin and Early Development: Schooling, religion, family connections., sexuality.

\_\_\_\_\_ Education: From secondary school to present,.

\_\_\_\_\_ Occupational history

\_\_\_\_\_ Religious affiliation and history

\_\_\_\_\_ Coming Out if LGBT: Becoming an ally or connection to LGBTQ concerns if not LGBTQ.

\_\_\_\_\_ **Adult Family formation and development: Ever married? Children and grandchildren? Current family?**

\_\_\_\_\_ **Military?**

\_\_\_\_\_ **Organizational affiliation and history, professional, civic and LGBTQ**

\_\_\_\_\_ **LGBT identity and/or issues' influence or effect on other aspects of life: family, social, religious, civil and political, spiritual.**

\_\_\_\_\_ **Awareness of and engagement with LGBT community: social world, political, civil rights, religious in Central PA and in the world outside our community?**

\_\_\_\_\_ **Important events or turning points in your life?**

\_\_\_\_\_ **What changes have you seen? What challenges remain?**

\_\_\_\_\_ **Do you have any documents, photos or artifacts related to the LGBT community that you might share with us or donate to the project?**

\_\_\_\_\_ **Have we missed anything? Anything else you want to state for the record?**

\_\_\_\_\_ **Do you know of others that you think we should contact and interview?**