

STUDENT INFORMATION FORM

VOLUNTEER YOUR INFORMATION to receive up-to-date information about funding opportunities and new programs, and to make your contact information available to faculty and staff from those programs. **PLEASE NOTE:** By completing this form, you grant permission for the Institute for Broadening Participation to provide your contact info to program faculty or staff.

Today's Date _____

About Yourself

first name: _____ middle: _____ last: _____

citizenship: () U.S. Citizen () Permanent Resident () Non U.S. Citizen

gender: () female () male () first generation college

ethnicity: _____ African American _____ Native American Indian _____ Puerto Rican _____ Other
(optional) _____ Asian American _____ Mexican American _____ Latino
_____ Caucasian _____ Pacific Islander _____ Other Hispanic

Any Special Needs (disability status)? _____

EMAIL ADDRESS: _____ PERSONAL WEB PAGE: _____

Have you heard about the following programs? Please check boxes:

AGEPE LSAMP NSF Grad Research Fellowships GK-12 Bridge to the Doctorate IGERT REU

If so, how did you hear about them? _____

Current Contact Information

street/PO Box: _____ city: _____ state: _____ zip: _____

current telephone: _____ this info is valid until (mm/yy): _____

Permanent Contact Information

SAME AS ABOVE

street/PO Box: _____ city: _____ state: _____ zip: _____

permanent telephone: _____ cell phone _____

Educational Background

current status: () freshman () sophomore () junior () senior () graduate

undergraduate institution: _____ graduation date: _____

undergraduate major: _____

graduate degree: () Masters () PhD () Other:

graduate institution: _____ graduation date: _____

graduate field of study: _____

Your Academic Interests

Expected level of study: () Bachelor's () Master's () PhD () Post Doc () Other: _____

I hope to enter a program in: () 2009 () 2010 () 2011 () 2012

I am interested in the following topics or areas of research: _____

I am interested in SUMMER RESEARCH opportunities for undergraduates. () Yes () No

FAX OR MAIL TO THE IBParticipation OFFICE
This form can also be filled out online at www.ibparticipation.org.

 **IBParticipation**
Institute for Broadening Participation . . . promoting pathways to STEM

PO Box 607, Damariscotta, ME 04543 Ph: (866)593-9103 Fx: (207)563-6069 www.ibparticipation.org