Grant number: _____

Reporting Period: _____

Institution: _____

Program Director: _____

Program Participants Information

Student Name* (Last name, First name)	E-mail	URM Group	Gender	Academic Status	Department / Program

* NOTE: Per program announcement: U.S. citizens or non-citizen nationals or permanent residents and must be matriculated full-time at the applicant institution

Instructions:
1. For each student, provide the text for the (name, e-mail and department) and click on each cell to select from the drop down list the appropriate answer for the other criteria.
2. If you need to add rows, copy any row within the table and paste it at the end of the table.

Coding:

1. URM Group:	AA - African American
H - Hispanic
NA - Native Americans (including Alaska Natives)
NP - Natives of the U.S. Pacific Islands

2. Gender:	F - Female
M - Male

3. Academic Status	Undergraduate Freshman
Undergraduate Sophomore
Undergraduate Junior
Undergraduate Senior
Graduate Ph.D.