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
	_				

<sup>\*</sup> **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 M.S. Graduate Ph.D.