



APPLICATION FOR RISING AND CURRENT GRADUATE STUDENTS

PART 1. GENERAL INFORMATION

1. Name: _____ (First) (Middle) (Last)

Former Last Name(s): _____

I will be 18 years or older as of May 7, 2012.

I am a U.S. citizen.

PART 2. ADDRESS AND CONTACT INFORMATION

2. Contact Information:

Address Line 1: _____

Address Line 2: _____

City: _____

State: _____

Country: _____

Zip: _____

Phone: () - Cell Phone: () -

Primary E-mail: Secondary E-mail: _____

The contact information above will be used to communicate with you and must be valid through September 30, 2012. You may use your parents' address if it is less likely to change. If any of the contact information above changes, you must notify us in writing by e-mail to DHSed@orau.org.

PART 3. EDUCATION AND RESEARCH EXPERIENCE

3. Academic standing as of February 5, 2012: _____

4. Enrollment status as of February 5, 2012: _____

5. Academic standing as of Fall 2012: _____

6. Enrollment status as of Fall 2012: _____

7. School enrolled in or planning to be enrolled in as of Fall 2012: _____

8. Information about the institution from which you will or did receive your bachelor's degree:

Institution's Name: _____

City: _____ State: _____

Degree Date (mm/yyyy, expected or received): _____

Name: _____

9. List all technical schools, community colleges, and universities/colleges you currently attend or have attended, beginning with your current institution.

Institution Name City, State/Country	Dates Attended <i>(mm/yyyy; if currently attending, list current month and year)</i>		Major Field of Study	Degree Received/Expected <i>(AS, BS, etc.)</i>	Degree Date Received/Expected <i>(mm/yyyy)</i>	Cumulative GPA <i>(4.00 Scale)</i>
	From	To				

10. Describe how long and in what capacity you have known your faculty team member.

11. List research experiences, beginning with the most recent.

Position	Dates <i>(mm/yyyy, if currently involved, list current month and year)</i>		Description of Duties Performed <i>(limit of 150 characters for each activity)</i>
	From	To	

Name: _____

PART 4. EDUCATIONAL AND PROFESSIONAL GOALS

12. Describe your educational and professional goals and how your participation in this program will aid in obtaining your goals and contribute to the overall DHS mission. Discuss how your educational and professional goals are relevant to the research project chosen for this program.

Name: _____

PART 5. PROPOSED OR CURRENT GRADUATE STUDY

13. Proposed or current graduate field of study: _____

14. Expected graduation date (mm/yyyy): _____

15. Proposed highest degree you will pursue: _____

16. List up to two proposed universities and programs for your graduate study, if you will be starting graduate school in Fall 2012. If you are already in a graduate program, use this space to describe your current program.

Name of Institution/City and State	Name of Department/Program and Degree Sought	Have you been admitted?

Name of Institution/City and State	Name of Department/Program and Degree Sought	Have you been admitted?

Name: _____

PART 6. ACADEMIC AWARDS, HONORS, AND ACTIVITIES

17. Awards/Honors. *List honor societies, scholarship and/or fellowship awards, and other recognition. Include past and current awards and honors.*

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18. Extracurricular Activities. *List any current community service organizations, technical societies and campus activities that you work with and/or volunteer with. Include offices held.*

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PART 7. REFERENCES

19. List at least two people familiar with your academic preparation and your technical abilities. Provide each of these individuals with the program reference form to submit by email by the published deadline. *Relatives should not be asked to submit references. Your faculty team member cannot provide a reference for you.*

Name	Title and Organization
1.	
2.	
3.	

Name: _____

PART 8. DEMOGRAPHIC INFORMATION

The U.S Department of Homeland Security is committed to broadening the participation of groups currently underrepresented in science and engineering in DHS activities. In order to accurately gauge our progress in achieving this important goal, we ask that applicants provide the requested demographic information about themselves. Submission of the requested information is voluntary and is not a precondition of award. Nonetheless, we need your cooperation, for information not submitted will seriously undermine the statistical validity, and therefore the usefulness, of information we get from others.

20. Ethnicity: *(check one response)*

- Hispanic or Latino *(a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race)*
- Not Hispanic or Latino
- Decline to answer

21. Race: *(check one or more)*

- American Indian or Alaska Native *(a person having origins in any of the original peoples of North, Central and South America and who maintains tribal affiliation or community attachment)*
- Asian *(a person having origins in any of the original peoples of the Far East, South East Asia or the India Subcontinent, including, for example, Cambodia, China, India or Japan)*
- Black or African American *(a person having origins in any of the Black racial groups of Africa)*
- Native Hawaiian or Other Pacific Islander *(a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands)*
- White *(a person having origins in any of the original peoples of Europe, the Middle East, or North Africa)*
- Other race: _____
- Decline to Answer

22. Gender:

Name: _____

PART 9. CERTIFICATION OF ACCURACY OF INFORMATION PROVIDED

I am aware that this program is supported by funding from the United States Government and, therefore, is subject to Federal law regarding false statements and fraud, particularly the criminal provisions of 18 U.S. Code Section 1001. I certify, under penalty of law, that the submitted student application contains no false or fraudulent representations, statements, or entries. I certify that my essay responses contain only my original thoughts or other properly attributed information.

The information requested on the application materials will be used in connection with the selection of qualified applicants and may be disclosed to qualified reviewers and staff assistants as part of the review process; to the institution the applicant is attending or is planning to attend or is employed by for the purpose of facilitating review or award decisions, or administering the awards; to government contractors, experts, volunteers and researchers and educators as necessary to complete assigned work; to other government agencies needing data regarding applicants or as part of the review process, or in order to coordinate programs; and to another Federal agency, court or party in a court or Federal administrative proceeding if the government is a party. Information from this system of records may be merged with other computer files to carry out statistical studies the results of which do not identify individuals. Disclosure may be made of awardees' names, home institutions, and fields of study for public information purposes. Submission of the information is voluntary; however, failure to provide full and complete information may reduce the possibility of receiving an award.

Under certain circumstances (such as an internship at a Federal facility or the Department of Homeland Security), the U.S. Government conducts background investigations to establish that individuals are eligible for a required security clearance. The background investigations for national security positions are conducted to develop information to show whether you are reliable, trustworthy, of good conduct and character, and loyal to the United States. In addition to filling out a form (such as the Standard Form 85, Questionnaire for Non-Sensitive Positions, which may be viewed at: <http://www.opm.gov/forms/html/sf.asp>), inquiries also may be made about a person's adherence to security requirements, honesty and integrity, vulnerability to exploitation or coercion, falsification, misrepresentation, and any other behavior, activities, or associations that tend to show the person is not reliable, trustworthy, or loyal.

NOTE: This application will be copied and used solely for the purpose of selecting internship recipients and administering the Program. Disclosure of the information is subject to Public Law 93-579 (Privacy Act of 1974), and Department of Homeland Security regulations.

Signature: _____

Date (m/d/yyyy): _____

The application should be submitted to ORISE by email to dhsed@orau.org by February 5, 2012.

If your computer does not support the electronic signature feature, please sign, date, and scan the signature page before returning the entire form by email to dhsed@orau.org.