

**2022 Astronaut Scholar Application**

# STUDENT INFORMATION

Name

|  |  |
| --- | --- |
|  |  |

 First Name Last Name

Date of Birth \*

|  |  |  |
| --- | --- | --- |
|  |  |  |

 Month Day Year

Gender \*

|  |
| --- |
|  |

Race \*

|  |
| --- |
|  |

Ethnicity \*

|  |
| --- |
|  |

Cell Phone Number \*

|  |  |
| --- | --- |
|  |  |

 Area Code Phone Number

Email Address \*

|  |
| --- |
|  |

Nominee mailing address while at university (dorm, APT, room, etc.) \*

|  |
| --- |
|  |

Street Address

|  |
| --- |
|  |

Street Address Line 2

|  |  |
| --- | --- |
|  |  |

City State /Province

|  |
| --- |
|  |

Postal / Zip Code

Email Address \*

|  |
| --- |
|  |

Home Address \*

|  |
| --- |
|  |

Street Address

|  |
| --- |
|  |

Street Address Line 2

|  |  |
| --- | --- |
|  |  |

City State /Province

|  |  |
| --- | --- |
|  |  |

Postal/ Zip Code Country

# UNIVERSITY INFORMATION

Major/Field of Study \*

|  |
| --- |
|  |

STEM Field \*

|  |
| --- |
|  |

 (Science, Technology, Engineering, or Mathematics?)

 Research Area \*

|  |
| --- |
|  |

Expected graduation date from degree program in effect FALL 2022 \*

|  |  |  |
| --- | --- | --- |
|  |  |  |

 Month Day Year

Fall 2022 Academic Status \*

|  |
| --- |
|  |

 Junior/Senior

Will Be a Full Time Student During the 2022 -2023 Academic Year \*

|  |
| --- |
|  |

 Yes/No

Have met with the Office of Prestigious Awards \*

|  |
| --- |
|  |

 Yes/No

# NOMINATING STAFF

Faculty Title \*

|  |
| --- |
|  |

 Nominating Faculty Name\*

|  |  |
| --- | --- |
|  |  |

 First Name Last Name

Nominating Faculty Office Email \*

|  |
| --- |
|  |

 example@example.com

Nominating Faculty Office Phone Number \*

|  |  |
| --- | --- |
|  |  |

 Area Code Phone Number

Department Chair or Director's Name \*

|  |  |
| --- | --- |
|  |  |

 First Name Last Name

**Dept Chair/Dir Title \***

|  |
| --- |
|  |

# PARENT/GUARDIAN CONTACT

Parent/Guardian Name #1 \*

|  |  |
| --- | --- |
|  |  |

 First Name Last Name

Parent/Guardian Phone Number #1\*

|  |  |
| --- | --- |
|  |  |

 Area Code Phone Number

Parent/Guardian Email #1 \*

|  |
| --- |
|  |

 example@example.com

**Is Parent #1 address the same as student home address above?** \*

|  |
| --- |
|  |

 Yes/No

Parent #1 Address (if different from student home address provided above) \*

|  |
| --- |
|  |

 Street Address

|  |
| --- |
|  |

 Street Address Line 2

|  |  |
| --- | --- |
|  |  |

 City State

|  |
| --- |
|  |

 Zip Code

Parent/Guardian Name # 2

|  |  |
| --- | --- |
|  |  |

 First Name Last Name

Parent/Guardian Phone Number #2

|  |  |
| --- | --- |
|  |  |

 Area Code Phone Number

Parent/Guardian Email #2

|  |
| --- |
|  |

 example@example.com

Is Parent #2 address the same as student home address above?

|  |
| --- |
|  |

 Yes/No

 Parent #2 Address (if different from student home address provided above)

|  |
| --- |
|  |

 Street Address

|  |
| --- |
|  |

 Street Address Line 2

|  |  |
| --- | --- |
|  |  |

 City State

|  |
| --- |
|  |

 Zip Code

 May ASF notify the nominee's parent(s)/guardian(s)? \*

|  |
| --- |
|  |

 Yes/No

#

# REQUIRED APPLICATION ENCLOSURES

Is this a scholarship renewal nomination/application? \*

|  |
| --- |
|  |

 Yes/No

Email \*

|  |
| --- |
|  |

 example@example.com

Are you related to faculty/staff on campus? \*

|  |
| --- |
|  |

Yes/No

If Yes, family member's STEM Department/Academic Program (use N/A if non-applicable)

|  |
| --- |
|  |

Nominee, if selected, agrees to media release for selection announcements, and related media. \*

|  |
| --- |
|  |

 Agree/Disagree

Submission Date \*

|  |  |  |
| --- | --- | --- |
|  |  |  |

 Month Day Year