**Applicant Contact and Demographic Information**

|  |
| --- |
| **Contact Information** |
| Name |  |
| College Address |  |
| Home Address |  |
| Phone |  |
| Official School Email Address |  |

|  |
| --- |
| **Institution** |
| Universities:[ ]  Central Connecticut State University[ ]  Eastern Connecticut State University[ ]  Fairfield University[ ]  Southern Connecticut State University[ ]  Trinity College[ ]  University of Bridgeport[ ]  University of Connecticut[ ]  University of Connecticut Health Center[ ]  University of Hartford[ ]  University of New Haven[ ]  Wesleyan University[ ]  Yale University | Community Colleges:[ ]  Capital Community College[ ]  Gateway Community College[ ]  Housatonic Community College[ ]  Manchester CT Community College[ ]  Middlesex Community College[ ]  Naugatuck Valley Community College[ ]  Northwestern CT Community College[ ]  Norwalk Community College[ ]  Quinebaug Valley Community College[ ]  Three Rivers Community College[ ]  Tunxis Community College |

|  |
| --- |
| ***Optional Information Note:*** *This information is being requested to help CT Space Grant Consortium comply with NASA reporting requirements. Thank you for aiding us in the collection of this data.* |
| **Gender:** [ ] Male [ ]  Female |
| **Ethnicity:** [ ] Hispanic or Latino [ ]  Non-Hispanic or Latino [ ]  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| **Race:** [ ] African American [ ] Caucasian [ ] Native American [ ] Pacific Islander [ ] Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| **Person with Disability:** [ ]  Yes \* [ ]  No\*To answer ‘Yes’, the applicant must have a physical or mental impairment that substantially limits one or more major life activities and have a record of this impairment. |