

# 2021 Final Astronaut Scholar Nominations

Astronaut Scholar Nominations for 2021-2022 Academic Year

#### **2021 Nomination Submission Guidance**

- Liaisons will coordinate with STEM faculty to solicit nominations for their institution's 2021
   Astronaut Scholar nominations (internally reviewing a minimum of EIGHT candidates) during
   the nomination window.
- Liaisons will, in collaboration with their campus's final nominees, upload and submit their final two nominations (four for matching universities) to ASF via this online application no later than Monday, March 29, 2021 (nominee packages must be provided by the liaisons via this portal to ensure ASF receives the university's FINAL NOMINATIONS).
- Liaisons will provide to ASF basic data on the university's nominee pool (minimum of EIGHT)
  considered when providing the university's final nominees. This data will be submitted via the
  2021 All Astronaut Scholar Nominees form.

The Student release of financial information will be sent via a separate request to the students after we have all nominees identified.

### STUDENT INFORMATION

# Student meets all nominating criteria \*

Student is nominated by Academic/Research faculty

Student has sustained academic achievement (especially in the major)

Student is highly performed in laboratory research and/or related work experience or similar projects (actively conducting considerable research as an undergrad)

Student demonstrates exceptional work ethic and stands out as a leader (academically, in the community, on campus, etc.)

Student is a United States citizen (birthright or naturalized)

# Name \*

First Name Last Name

# Date of Birth \*

Month Day Year

### Gender \*

Male

Female

# Ethnicity \*

Hispanic or Latino

Not Hispanic or Latino

Rather not Disclose

### Race \*

American Indian or Native Alaskan

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

Rather not Disclose

Cell Phone Number *		
Area Code	Phone Number	
Email Address *		
Nominee mailing add	ress while at university (dorm, APT, room, etc.) *	
Street Address		
Street Address Line 2		
City	State / Province	
Postal / Zip Code		
Home Address *		
Street Address		
Street Address Line 2		
City	State / Province	
Postal / Zip Code	Country	

# **UNIVERSITY INFORMATION**

University/College/Institution \*

Major/Field of Study *		
STEM Field *		
Fall 2021 Academic Status *		
Junior Senior		
Sellioi		
Expected graduation date from degree program in effect FALL 2021 *		
Month Day Year		
NOMINATING STAFF		
Nominating Faculty Name *		
First Name Last Name		
Nominating Faculty Title *		
Nominating Faculty Office Phone Number *		
Area Code Phone Number		
Nominating Faculty Office Email *		
example@example.com		

First Name Last Name

**Department Chair or Director's Name \*** 

Dept Cha	air/Dir	Title *
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# 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? *		
Parent #1 Address (if different from student home address provided above)		
Street Address		
Street Address Line 2		
City		
Zip Code		

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?			
Parent #2 Address (if different from student home address provided above)			
Street Address			
Street Address Line 2			
City	State / Province		
Postal / Zip Code			
	LIAISON CONTACT INFORMATION		
Liaison Name *			
First Name	Last Name		

Parent/Guardian Name # 2

Liaison Phone Number *		
Area Code	Phone Number	
Liaison Email *		
example@example.com		
Liaison Office address *		
University Name and Program Office		
Street Address Line		
City	State / Province	
Postal / Zip Code		
	FINANCIAL AID MAILING INFORMATION	
Name of faculty/staff member scholarship checks should be sent to *		
First Name Last Nam	ne	
Title *		

Liaison Title \*

Office Phone Number *		
Area Code	Phone Number	
Email *		
example@example.com		
MAILING OFFICE FOR SCHOLARSHIP *		
University Name and Program Office		
Street Address Line		
City	State / Province	
Postal / Zip Code		
REQUIRED APPLICATION ENCLOSURES		
Is this a scholarship renewal nomination/application? *		
Yes		
No		
Our institution lists the Astronaut Scholarship as a prestigious scholarship on its website AND presents it as such in its media and public communications. *		
Yes		
No		

Please provide a link to your scholarships page where the Astronaut Scholarship is identified as a prestigious scholarship.

# Files submitted meet filename convention provided for each document \*

Last\_First\_MI\_2021\_Personal Statement
Last\_First\_MI\_2021\_LOR#1
Last\_First\_MI\_2021\_LOR#2
Last\_First\_MI\_2021\_CV
Last\_First\_MI\_2021\_Transcripts
Last\_First\_MI\_2021\_Citizenship

# If selected, Nominee agrees to media release for Astronaut Scholarship selection announcements and related media distributions. \*

Agrees

## Submission Date \*



Month Day Year

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