

Arkansas Space Grant Consortium

University of Arkansas at Little Rock

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Applicant Data Sheet

(please type)

NASA requests applicant data for their evaluation of the Arkansas Space Grant Consortium, relative to soliciting applications from a diverse population. Your completion and submission of this form will assist us in this regard. We greatly appreciate your cooperation.

Name: _____

DOB: _____

School: _____

Major: _____

Gender: *Male* *Female*

Physical or other Handicap: *Yes* *No*

(Impairment that substantially limits one or more major life activity – blindness, deafness, mobility impairment)

Ethnicity:

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 – (A person not of Hispanic or Latino ethnicity)

Race:

(Please check all that apply)

American Indian or Alaska Native – (origins from peoples of North and South American (including Central America) and who maintains tribal affiliation or community attachment)

Asian – (origins from peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam)

Black or African American – (origins from peoples of any of the black racial groups of Africa)

Native Hawaiian or Other Pacific Islander – (origins from peoples of Hawaii, Guam, Samoa, or other Pacific Islands)

White or Caucasian – (origins from peoples of Europe, the Middle East, or North Africa)