

Ohio Space Grant Consortium

2020-2021 MASTER'S FELLOWSHIP APPLICATION

(Must be delivered by February 1, 2020, to your Campus Representative (Refer to Program Announcement for listing.) Please TYPE/PRINT all information requested. All information will be kept strictly confidential and not shared.

I. Student Information

Ohio Space Grant fellowships are largely supported through Federal funding. As a result, you must be a U. S. citizen to be eligible for this award. The following information is requested by NASA Headquarters for statistical record keeping.

NAME: (Last) (First) (Middle)

YOUR HOME (PERMANENT) ADDRESS: YOUR SCHOOL ADDRESS: (Complete only if you reside on campus.)

HOME PHONE: () CELL PHONE: ()

SCHOOL EMAIL: OTHER EMAIL:

DATE OF BIRTH: Month / Day / Year COUNTRY OF BIRTH:

GENDER: Mal Female

ETHNICITY: Hispanic or Latino Not-Hispanic or not Latino

RACE (Select all that apply):

American Indian or Alaskan Native Black or African American Native Hawaiian or Other Pacific Islander White Asian Some Other Race

I am a person with a disability (that limits a major life activity). If yes, please list:

I am a Military Veteran (a person who has served in any branch of the United States Armed Forces.)

I am a U. S. Citizen (You must be a U. S. Citizen to be eligible for this award.)

List Ohio Congressional District (#1 - 16) - OHIO RESIDENTS ONLY!

To locate your Congressional District, refer to: http://www.house.gov/ and enter your ZIP Code using your Home Address.

II. School Information

Date B.S. completed: Month / Year University Department

I have applied for admission/have been admitted to: University

to obtain a graduate degree in: Discipline/Department

Anticipated Graduation Date: Month Year

Undergraduate GPA: _____ out of _____ 4.00 Graduate GPA: _____ out of _____

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Applicant Name _____

III. Personal Objective Statement (Discuss your educational and career goals in the following space):

IV. Proposed Research Project (must align with one of the 4 NASA Mission Directorates listed below):

NASA Mission Directorate Alignment (select all that apply):

[Aeronautics Research Mission Directorate](#)

- Advanced Air Vehicles
- Airspace Operations and Safety
- Integrated Aviation Systems
- Transformative Aeronautics Concepts

[Science Mission Directorate](#)

- Astrophysics
- Earth Science
- Heliophysics
- Planetary Science

[Human Exploration & Operations Mission Directorate](#)

- Human Research
- Space Life Science
- Physical Science Research
- Engineering Research

[Space Technology Mission Directorate](#)

- Transformative Crosscutting Technologies
- Technology Research & Development Challenges

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Applicant Name _____

Project Title: _____

Brief Description (must be approved by Advisor):

Signature of Advisor _____

Date _____

V. Research Program Proposal (Outlines goals and objectives of your proposed research program and timeline (maximum of 2 pages and must align with one of the 4 NASA Mission Directorates).

VI. Resume (Include all scholarships, honorary societies, awards, engineering or scientific student leadership roles, and any other relevant recognition that you have received since entering college whether academic, non-academic or extracurricular. Include any fellowship that you hold at the time of submission of this application (note you are not eligible for this award if you currently hold another Federal fellowship). The resume should also include any research projects that you have worked on, research publications on which you are author or co-author, and presentations).

VII. Listing of Publications and Presentations (Provide a listing of any previous research publications and presentations related to your research for which you are an author or co-author. Provide separate subheadings for publications and presentations. Presentations include abstracts, oral presentations, or posters presented at meetings).

VIII. Transcripts (Attach a copy of your Unofficial transcripts – both undergraduate and previous graduate work).

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Applicant Name _____

IX. Certification (By signing this application, I am a full-time student at the Ohio university indicated during the period covered as stated in the Application. If selected, I will comply with all reporting and other administrative requirements of the award. I certify that all information contained in the Application package is accurate, and that I meet all of the eligibility requirements.

Signature of Applicant _____ Date _____

Campus Representative _____ Date _____

X. Checklist (A complete application package includes the following):

1. Completed Application form.
2. Title and brief description of proposed research project – Signature approval by Advisor required.
3. Attach copy of research program proposal.
4. Attach copy of resume.
5. Attach copy of listing of publications and presentations.
6. Attach Unofficial Transcripts.
7. Certification – Both Student Signature and Campus Representative Signature required.

Fellowship awards are contingent on appropriate funding from NASA.

A complete application package must be submitted to the Campus Representative by **February 1.**