New STEM Ambassador application, for reference only.

Applications are subject to change.

Applicants must submit via Submittable during the application acceptance window. See NDSGC homepage for deadline.

	(required)
	Limit: 300 character
Are yo	ou currently a STEM Ambassador?
	res es
<u> </u>	lo
Are yo	ou a U.S. Citizen? (required)
Y	res
) N	lo
Name	of the US CITY where you were born or naturalized: (required)
Acade	emic Standing (required)
	am in Good Academic Standing (GPA 2.0 or higher)

Se		
	ect	
Prir	nary email (required)	
em	ail@example.com	
Γhis	could be your school email address.	
Sec	Secondary email address (required)	
em	ail@example.com	
Γhis	could be your personal email address, or how we can reach you if your school	
addı	ess changes.	
Dha	no number (ve quive d)	
	ne number (required)	
Dat	e of birth (required)	
Dat ===	e of birth (required)	
	e of birth (required)	
	e of birth (required) v do you identify? (required)	
	v do you identify? (required)	
	v do you identify? (required) Asian American	
	v do you identify? (required) Asian American Black or African American	

\bigcirc	Alaska Native American
\bigcirc	Native Hawaiian or other Pacific Islander American
\bigcirc	Multiracial American
\bigcirc	White
\bigcirc	Other
\bigcirc	Prefer not to disclose
Used	for NASA reporting purposes.
Gen	der Identity: (required)
\bigcirc	Woman
\bigcirc	Man
\bigcirc	Transgender Man
\bigcirc	Transgender Woman
	Nonbinary
	Other
	Prefer not to disclose
Used	for NASA reporting purposes
	e you ever served (or are currently serving) the military?
\bigcirc	Yes
\bigcirc	No
Used	for NASA reporting purposes.

′ ou	r current degree/program of study: (required)
Νhε	en do you anticipate you'll graduate? (required)
zam	ple: December 2024
/ 011	r donartmentic name (//
. Ju	r department's name: (required)
. Ju	r department's name: (required)
· Ju	r department's name: (required)
	r department's mailing address: (required)
/ ou	r department's mailing address: (required)
fou	
You	r department's mailing address: (required)
fou This contails	r department's mailing address: (required)
fou This contails	r department's mailing address: (required) can be the address of the front desk or mailroom within your department. If we supplies to your school, this is where they should go.
You This o	r department's mailing address: (required) can be the address of the front desk or mailroom within your department. If we supplies to your school, this is where they should go.

Plea	ase type your student ID number: (required)
Wha	at is your current academic status? (required)
0	Undergraduate student
\bigcirc	Graduate student
	at year will you be in school for the 2024-2025 academic year?
\bigcirc	Freshman
\bigcirc	Sophomore
	Junior
	Senior
Pleas	en do you anticipate you'll graduate? (required) se include the semester and year. at is your highest degree goal? (required)
\bigcap	Associates
\bigcirc	Bachelors
\bigcirc	Masters

	Other
\bigcirc	Not sure
Hov	v would you describe your workload? (required)
	Just academics for me!
	I am also a research or teaching assistant.
	I am also on a sports team.
	I also participate in extracurricular events (i.e. music performances, aviation flights, etc.)
	I also work part-time or full-time
	Other
Plea	se check all that apply.
	we provide you with any productivity enhancers, or other ADA ommodations? (required) Yes
	No
	ase upload your unofficial transcript here to show your demic Standing: (required) Choose File

	Choose File
Upload a file. No files ha	ve been attached yet.
Acceptable file types: .po	df, .doc, .docx
Please limit this to 1-2 pa	ges max.
How will you supply	y your Letter of Recommendation? (required)
The recommende	r will email the letter to the NDSGC
I will send a reque	st to my recommender from this Submittable platform.
Other	st to my recommender from this Submittable platform.
	st to my recommender from this Submittable platform.
Other	st to my recommender from this Submittable platform. king to write your LOR? (required)
Other	
Other	
Other Who will you be asl	
Other Who will you be asl Name	king to write your LOR? (required)
Other Who will you be asl Name	king to write your LOR? (required)
Other	king to write your LOR? (required)
Other Who will you be asl Name Document Request	king to write your LOR? (required)
Other Who will you be asl Name Document Request Reference Email Address email@example.com	king to write your LOR? (required)

request at anytime, otherwise it will be sent automatically when you submit this form.
Send Request Now
Enter the email address of the person providing the letter of recommendation. They will receive an email with a link to upload the document. Be sure to have them whitelist submittable.com or check their spam folder to ensure they receive your request.
Essay question time! (required)
I am ready to read the essay questions.
I am not ready to read the essay questions.
This is a significant portion of your application, make sure you provide a well written essay response. This is a chance to read through the questions, save your form's progress, leave, and return at a later time.
Question 1: What makes you an excellent team player? Describe different scenarios as a team player. (required)
Limit: 350 words
Limit: 350 words Academic and Career Goals:

Limit: 350 words

	Limit: 350 words
Leadership Style:	
Question 4: How do you describe yo example of a time when you were us	· •
project. (required)	
	Limit: 350 words
	Limit: 350 words
Question 5: Describe a time you had	Limit: 350 words
•	d to lead a team while
Question 5: Describe a time you had implementing project changes. (requi	d to lead a team while
•	d to lead a team while

Question 6: Describe a time you mentored another individual hoping to become a leader. (required)

Optional: Anything o	موادم؟
	case a project you've been working on or a skill you have! to us by submitting a photo, a video, or by writing to us in t
Optional file upload	for 'Anything else?'
	Choose File
Jpload a file. No files hav	e been attached yet.
Acceptable file types: .pdf osd	f, .docx, .jpg, .jpeg, .gif, .tif, .tiff, .png, .mp3, .mp4, .mov, .pptx
dow did you hear al program?	bout the ND Space Grant STEM Ambassador
Any additional uploa	ads

Choose File

Select up to 3 files to attach. No files have been attached yet. You may add 3 more files.

Acceptable file types: .pdf, .doc, .docx, .jpg, .jpeg, .png

Optional upload spot

Save Draft

Submit Form

Drafts may be visible to the administrators of this program.