Project Description
The High School Shadowing Project provides high school students with a career exploration experience for 1 day or up to 5 days (i.e., junior/senior projects) at the NASA John H. Glenn Research Center (GRC). Opportunities are available during the school year for students interested in science, technology, engineering, mathematics (STEM), and professional administration. This project is sponsored by the Educational Programs Office (EPO).

Project Goal
Shadowing provides high school students with an opportunity to explore career possibilities in a research and development environment while under the guidance of a GRC scientist, engineer, technician, or administrative professional that serves as the student’s mentor. Students are provided with information about various careers, career paths, and GRC educational resources and programs.

Students will depart from GRC with knowledge that will be of value to them in career decision making and an awareness of additional educational opportunities and resources at GRC.

The EPO is committed to increasing the number and diversity of students from underrepresented and underserved communities in NASA-related STEM fields. Traditionally, underrepresented groups in STEM include females, African-American, Hispanics, Native Americans, Pacific Islanders (natives of the Philippines, Guam, American Samoa, or Micronesia), and disabled students. Please be advised that while the project is open to all equally qualified candidates, GRC is very interested in recruiting applicants who belong to a recognized underrepresented group in STEM.

The NASA Vision—To reach for new heights and reveal the unknown so that what we do and learn will benefit all humankind. The NASA Mission—To pioneer the future in space exploration, scientific discovery, and aeronautics research. As one of NASA's 10 field centers, the John H. Glenn Research Center at Lewis Field supports all NASA missions and the major programs of our Agency.

GRC works as a diverse team in partnership with government, industry, and academia to increase national wealth, safety, security, protect the environment, and explore the universe. GRC is distinguished by its unique blend of aeronautics and spaceflight experience. As we move toward a greater focus on spaceflight hardware development, we are benefiting from our various accomplishments and expertise in aeronautics. Our work is focused on technological advancements in spaceflight systems development, aeropropulsion, space propulsion, power systems, nuclear systems, communications, and human research.

GRC is located in the Great Lakes region of Ohio and occupies a 350-acre site adjacent to Cleveland Hopkins International Airport. The Center comprises over 150 buildings that contain a unique collection of world-class facilities. NASA GRC also includes the 6400-acre Plum Brook Station near Sandusky, Ohio.

You are encouraged to visit the GRC home page to learn more about our research activities and programs at http://www.nasa.gov/centers/glenn/home/index.html.

Eligibility Requirements
- Applicants must be U.S. citizens, a high school student, and at least 16 years of age by the application deadline.
- Students who were 2011–2012 project participants must submit an application and meet the eligibility requirements.

Project Requirements
- Students typically shadow for 1 day. Junior or senior project shadowing opportunities (up to 5 days) are very limited.
- Students are required to attend orientation and wrap-up meeting.
- Students must complete evaluations—pre- and post- for long-term students.

Students must agree to complete the shadowing experience between the hours of 9 a.m. and 4 p.m. Students who are participating in longer formal school career programs (up to 5 days) must be available every business day on a full-time basis for the duration of their project. Students are required to adhere to all NASA safety, security, and program guidelines. Completion of the evaluations is a project requirement as feedback is vital to the success of our programs.

www.nasa.gov
Long Term (Junior/Senior) Projects

Long-term projects are limited to up to 5 days (1 week) and are dependent upon the mentors’ availability. All long-term project applicants will be accepted under the following conditions:

1. There is an employee in the mentor pool interested in mentoring a long-term project student in your area of interest or you already have identified a NASA employee on your application who will serve as your mentor.
2. Student agrees to provide project forms and coordinate project with mentor prior to arrival. Not providing papers in a timely manner could jeopardize a scheduled junior/senior project experience as mentors need time to prepare for students and respond to school guidelines.
3. Long term projects are available March through May.
4. Travel and lodging expenses are at the student/family’s expense. Lodging information can be provided upon request.

Application Information

Students must complete and return the attached application and forms of the entire application packet. Applications can be obtained at the following Web site: www.nasa.gov/centers/glenn/education/ShadowingProgram_GRC.html. Applications must be postmarked or date-stamped by our office no later than the deadline dates. Incomplete applications will not be processed. Placements cannot be made without the signature of a parent or guardian (if applicable). Return all forms to

NASA Glenn Research Center
Educational Programs Office
Attn: Shadowing Project, Mail Stop 7–4
21000 Brookpark Road
Cleveland, OH 44135–3191

Selection Process

Student requests will be accepted on a first-come, first-served basis. Application packet must be complete for consideration.

Shadowing placements are dependent upon the availability of appropriate GRC mentors and facilities. The Educational Programs Office cannot guarantee a shadowing experience and will not sign any forms that state a shadowing experience is guaranteed. Each session has limited placement.

Notification

EPO will notify the applicants via e-mail and cc the parent/guardian, and guidance counselor noted on the student’s application by the appropriate notification date listed below. Students will be contacted to confirm their attendance.

Students should notify the NASA Glenn Educational Programs Office (EPO) by phone, 216–433–6656 or via e-mail, GRC-Intern@mail.nasa.gov, if their e-mail, phone (home/cell), or home address changes. Students should also call or e-mail when inquiring about the status of their application or to obtain additional information.

Schedule

<table>
<thead>
<tr>
<th>Session/Start Date</th>
<th>Application Deadline</th>
<th>Selection Notification Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>II/February 27, 2013</td>
<td>January 25, 2013</td>
<td>February 13, 2013</td>
</tr>
<tr>
<td>III/March 26, 2013</td>
<td>February 22, 2013</td>
<td>March 8, 2013</td>
</tr>
<tr>
<td>IV/April 24, 2013</td>
<td>February 22, 2013</td>
<td>April 5, 2013</td>
</tr>
</tbody>
</table>
2012–2013 Shadowing Project Student Application Form

Educational Programs Office
Please type or print in black ink only.

Full legal name __________________________________________________ Date of birth _________________

Last name, suffix (e.g., Jr.) First name Middle name mm/dd/year (e.g., 11/14/1992)

Place of birth ______________________________________________________ Gender: ❑ Male ❑ Female

City, State, Country

U.S. Citizen ❑ Yes ❑ No

If U.S. citizen and born outside the United States or Puerto Rico and selected for this project, you must provide a copy of your Naturalization paperwork and/or Passport to our office 5 days prior to your session date and upon arrival bring the original copies with you to ensure you are granted security clearance at the front gate.

You Must Provide Both Addresses:

Home address ___________________________________ School name _______________________________
          ____________________________________________

City State Please provide your 9-digit ZIP Code School address _____________________________

If homeschooled, write "homeschooled"

see http://zip4.usps.com/zip4/welcome.jsp

Telephone no. (        ) _____________________________        School telephone no. (        ) ___________________

Cell no. (        ) __________________________________        __________________________________________

Student e-mail address______________________________________________________

Parent/guardian e-mail address _______________________________________________

Name and e-mail address of guidance counselor ______________________________________

Print name

_______________________________________________

E-mail

School direct telephone number (        ) _____________________________________

Academic level as of fall 2013:

❑ HS Sophomore ❑ HS Junior ❑ HS Senior ❑ College Freshman

Office Use Only

Date received _______________________ Date processed ______________________ Initials _________________

see http://zip4.usps.com/zip4/welcome.jsp

If homeschooled, write "homeschooled"

Print name

E-mail

City, State,Country

Please provide your 9-digit ZIP Code

City          State      Please provide your 9-digit ZIP Code
Duration of shadowing experience you are requesting:

- 1 day  
- Long term (i.e., junior/senior projects)

1 day—Check the session you wish to shadow:

- Session I  
- Session II  
- Session III  
- Session IV

**Long Term (Junior/Senior) Project Students**—Indicate preferred month (s) below and any specified dates for project:

____________________________________________________________________________________________

Please note, accommodations are dependent upon mentor's availability.

Do you know someone at NASA GRC who would be willing to be your mentor?

- Yes  
- No

Name of employee: ____________________________  Employee telephone number: ____________________________

If yes, has this employee **verbally committed** to mentoring you on the dates specified on this application?

- Yes  
- No

Comments: ________________________________________________________________

Name and signature of recommending adult:

_______________________________________________  _____________________________________

Print name: ____________________________  Signature: ____________________________

Position: ____________________________

Telephone (       ) ________________________ Ext._________

Alternate telephone (       ) _____________________________

E-mail address: ____________________________

Please note that additional comments or letters of recommendation are not needed.

Relationship to student: ____________________________

How did you learn about the program?

- Faculty member or school official
- Group visit to GRC
- Inquiry to NASA about summer opportunities
- NASA Web site
- GRC Educational Programs staff
- GRC Educational Programs Web site
- Flyer
- Public Outreach event
- Friend
- Other (please specify) ____________________________
2012–2013 High School Shadowing Project
Student Certification

I certify, by my signature below, that I am a citizen of the United States of America and that all information contained in this application is accurate and correct. I further understand and agree that any misrepresentation or inaccurate information reported on my application will be cause for disqualification for consideration and from participation in the Shadowing Project and other NASA programs.

If selected to participate, I understand I must participate for the entire time allocated and must abide by the project safety and security policies and procedures.

Print your full name below and sign and date for acceptance—the signature of a parent or guardian is only required if student is under 18 years of age.

Student          Parent/Guardian

Print name

Signature

Date

Placement

Please number your top three choices in the area which you would like to shadow. Note: There are no shadowing opportunities in medicine or veterinary medicine.

☐ Aero/Astro Engineering
☐ Accounting
☐ Life Science
☐ Biomedical Science
☐ Mathematics
☐ Chemical Engineering
☐ Chemistry
☐ Computer Engineering/Science
☐ Electrical Engineering
☐ Video/Animation
☐ Structural Engineering
☐ Environmental Engineering/Science
☐ Biological Science
☐ Business Administration
☐ Materials Engineering/Science
☐ Graphic Design/Technical Illustration
☐ Mechanical Engineering
☐ Physics
☐ Physical Science
☐ Electronic Engineering
☐ Systems Engineering
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Student Narrative
Describe how your experience at NASA will help further your anticipated college/career interests.

______________________________________________________________________________________________________
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2012–2013 High School Shadowing Project

Release Form

(Completion of form is required for processing of application.)

For appearance in photographs or other image-based media or production by or for NASA

John H. Glenn Research Center at Lewis Field
National Aeronautics and Space Administration
21000 Brookpark Road
Cleveland, OH 44135–3191

Glenn Educational Programs Office Workshop/Activity/Event
2012–2013 Shadowing Project

To the United States Government, NASA, the Glenn Research Center, its contractors, partners, or those acting with its authority and permission and employees of the United States Government, NASA, the Glenn Research Center, its contractors, partners, or those acting with its authority and permission I hereby

a. grant the unrestricted right and permission to copyright and use, re-use, publish, and re-publish photographic or digital images of me or in which I may be included intact or in part, composite or distorted in character or form, without restriction as to changes or transformations in conjunction with my own or a fictitious name, or reproduction hereof in color or otherwise, made through any and all media now or hereafter known for illustration, art, promotion, advertising, trade, or any other purpose whatsoever.

b. permit the use of any printed material in connection herewith.

c. release, discharge, and agree to save harmless from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form whether intentional or otherwise, that may occur or be produced in the taking of said picture or in any subsequent processing thereof, as well as any publication thereof, including without limitations any claims for libel or invasion of privacy.

d. ❑ affirm that I am over the age of 18 and have the right to contract in my own name. I have read the above authorization, release, and agreement, prior to its execution; I fully understand the contents thereof. This agreement shall be binding upon me and my heirs, legal representatives, and assigns. Additional information is required—see bottom three lines.

or

e. ❑ affirm that I am the parent or legal guardian for

Name of the minor subject(s) depicted in the photographs or digital images and have the right to contract for him/her. I have read the above authorization, release, and agreement, prior to its execution; I fully understand the contents thereof. This agreement shall be binding upon me and my heirs, legal representatives, and assigns and those of the subject(s) listed above. Parental/guardian information is required below.

Printed name

Address

Signature

City

State

ZIP code

Date

Phone

— 7 —
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# Emergency Medical Authorization

(Completion of form is required for processing of application.)

**NASA Glenn Research Center**

<table>
<thead>
<tr>
<th>FULL LEGAL NAME OF STUDENT (Last, suffix (e.g., Jr.), first, middle initial)</th>
<th>IS STUDENT UNDER 18?</th>
<th>DATE OF BIRTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>HOME TELEPHONE NUMBER</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**EMERGENCY CONTACT** (Please include name and relationship and home, work, and cell phone numbers.)

**ALTERNATE EMERGENCY CONTACT** (Please include name and relationship and home, work, and cell phone numbers.)

Facts concerning the student's medical history to which the medical practitioner should be alerted. Submission of this information is VOLUNTARY and will remain strictly confidential; however, it would be helpful in time of an emergency medical situation.

**ALLERGIES**

**CURRENT MEDICATIONS**

**RESTRICTIONS TO ANY ACTIVITIES?**

**PAST MEDICAL/SURGICAL HISTORY**

**LAST TETANUS/DIPHTHERIA IMMUNIZATION**

**MEDICAL INSURANCE INFORMATION OR SUBMIT COPY OF CARD**

<table>
<thead>
<tr>
<th>INSURANCE COMPANY NAME:</th>
</tr>
</thead>
<tbody>
<tr>
<td>GROUP NUMBER:</td>
</tr>
<tr>
<td>ID NUMBER:</td>
</tr>
<tr>
<td>POLICY-HOLDER NAME</td>
</tr>
</tbody>
</table>

In the event that reasonable attempts to contact one of the parents of, or the legal guardian of, the above minor are not successful, I hereby give my consent to the administration of medical treatment deemed necessary by the Medical Services Office at the NASA Glenn Research Center. In the event that more extensive medical care is necessary than that given by the Glenn Medical Services Office, I authorize the transfer of the minor to a local hospital by ambulance.

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**SIGNATURE OF PARENT/GUARDIAN**

**DATE**

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**NASA C-10039 (SEP 11)**
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Student Information

Name (print): _____________________________________________________

Program you are applying for: 2012–2013 Shadowing Project

The information solicited on this form will not be available to those responsible for reviewing applications, but will be used by NASA primarily to determine the extent to which various populations are represented in the applicant pool. This information will remain strictly confidential.

In order to determine the degree to which members of each ethnic and racial group are reached by this announcement, NASA requests that the student check the appropriate block(s) below. Submission of this information is VOLUNTARY.

Please complete all questions even if your response is “Do not wish to provide.” and return with application materials.

What is your ethnicity? (check one)  Individual with a disability (check one or more)

❑ Do not wish to provide
❑ Hispanic or Latino
❑ Not Hispanic or Latino

Hearing impairment
❑ Visual impairment
❑ Mobility/orthopedic impairment

What is your race? (check one or more)  Other __________________________________________

❑ American Indian or Alaska Native
❑ Asian
❑ Black or African-American
❑ Native Hawaiian or other Pacific Islander
❑ White
❑ Race not listed above
❑ Do not wish to provide

❑ None
❑ Do not wish to provide

Please list any special accommodations required:
__________________________________________________________
__________________________________________________________
__________________________________________________________