

Workshop on Education in Computer Security (WECS)

Form A: Participant's Application

This form, submitted no later than 15 April 2003, constitutes formal application to the Workshop on Education in Computer Security. It will be used to determine eligibility for attendance at WECS as well as for the scholarship. Please print or type. Late applications will be considered if workshop vacancies exist. This form may be duplicated.

Return this form to: Dr. Cynthia E. Irvine, Director
Workshop on Education in Computer Security
Code CS/Ic, Computer Science Department
Naval Postgraduate School
Monterey, CA 93943

1. Mr./Mrs./Ms./Dr. Name: _____
(circle one) (Last, First, Initial)

2. U.S. citizen: ___ Yes ___ No

3. Name and address of your institution: _____
_____ Type of School:
_____ Community College
_____ 4-year College
_____ University
_____ ZIP _____ Other _____

Work Tel: _____ (area code) Work Fax: _____

4. Residential Address: _____ Home Tel: _____
(area code)

_____ Desired Mailing Address:
_____ ZIP _____ Work Home

E-mail address: _____

5. Employment record for the past 5 years (in reverse chronological order):

Dates	Employer	Nature of Activity
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Expected position
next year

Current position
2002-03

Prior Position

6. Computer science or information technology teaching experience (including years of experience):

7. List your weekly teaching schedule at the present time, including hours per week:

(Complete page 2 of form)

8. List computer technology or computer science courses (by name, not number), units or topics you have taught during the last four years, including the number of weeks spent on them per year:

9. College or university education:

Institution	State	Year	Degree	Major Subject	Minor

10. In what ways have you been involved with curriculum development?

11. How do you intend to promote participation by traditionally under-represented groups in information assurance as the result of participating in this program?

12. Acceptance to this workshop requires a commitment to incorporate WECS materials into a minimum of 8 hours of lecture or laboratory course work by April 2004. This commitment includes providing a report to WECS of your efforts. List the ways by which you hope to accomplish this.

13. Please tell us how you became aware of the Workshop on Education in Computer Security:

14. "The information given on this application is accurate and complete."

(Your Signature)

(Date)

If you are accepted to this program, you will be required to provide additional information, including your Social Security Number, in order to receive the program scholarship.