

# ANS General Application

PROGRAM DEADLINE: February 01, 2025 at 11:59 PM CST (Midnight)

## Basic Information

### Contact Information

First name \*

Middle initial

Last name \*

Present street address \*

City \*

State \*

Zip code \*

Country \*

Home/Cell phone \*

List your primary phone number

Email \*

Birthdate \*

Clear

Educational institution enrolled in/applied to \*

If you are undecided, list your top choice

Department of school \*

Department Chair for the upcoming year \*

If selected for a scholarship, ANS will contact the Department Chair to verify enrollment in the fall before disbursing funds. If you do not know who this is, please consult your faculty advisor to find out who the best contact is.

Department Chair Email \*

Used to verify enrollment in the Fall

Your status in the upcoming academic year \*

- Community college student
- Trade school student
- Freshman
- Sophomore
- Junior
- Senior
- MS student
- PhD student

Are you an ANS student member? \*

Yes

No

If yes, please provide your member ID#.

(Max range: 999999999)

## Education and Training

### Education and Training

For attendance at a College, University or Technical Institute, give the information requested for each undergraduate and graduate degree. If you did not receive a degree but have some college, please give dates of attendance and total hours completed. All transcripts (official or unofficial) must be included in your application package.

Current School \*

Location \*

Start date \*

Clear

End date \*

Clear

Major \*

Unweighted GPA \*

Degree Received \*

- Associates
- Bachelors
- Certificate
- Masters
- None
- PhD/Doctorate

Title of Degree Received \*

List any academic honors received (i,e Dean's List, honor societies, etc)

Do you have more? \*

- Yes
- No

## Current School Transcript

Please send this transcript request to your school's registrar's office or advisor. For current college students: You are responsible for contacting your registrar's office/advisor to ensure your transcript has been properly requested using your institution's transcript request procedure. You must also verify that this request has been fulfilled and sent. If the transcripts are not received by the deadline, your application will not be submitted. Your registrar's office or advisor can upload the transcripts using this request, email them directly to [scholarships@ans.org](mailto:scholarships@ans.org), or mail them to American Nuclear Society, c/o Scholarship Program, 1111 Pasquinelli Dr. Ste 350, Westmont, IL 60559. Both official and unofficial transcripts are accepted however the transcript must be received from the proper institution. Applicant submissions or sending this request to yourself is NOT permitted. If it is found that the transcript was not received using the proper procedures, you will be disqualified for any scholarships.

Contact's First Name \*

If you don't have a name, enter "Registrar's"

Contact's Last Name \*

If you don't have a name, enter "Office"

Contact's Email \*

If your transcripts are being sent from your university, enter "scholarships@ans.org"

Contact's Phone Number

Contact's Title

Contact's Organization

## Education and Training

**Education and Training**

For attendance at a College, University or Technical Institute, give the information requested for each undergraduate and graduate degree. If you did not receive a degree, but have some college, please give dates of attendance and total hours completed. All transcripts (official or unofficial) must be included in your application package.

School

Location

Start date

Clear

End date

Clear

Major

Unweighted GPA

Degree Received \*

- Associates
- Bachelors
- Certificate
- Masters
- PhD/Doctorate
- None

Title of Degree Received \*

Do you have more? \*

- Yes
- No

## Education and Training

### Additional Education/Training

List other schools (secondary, vocational), specialized military services, and apprenticeship programs.

School

City

State

Country

Start date

Clear

End date

Clear

Field of study

Secondary school GPA

## Extracurricular and Employment Experience

### Extracurricular Activities

List any extracurricular activities (offices held, athletics, clubs, etc) or professional experience (internships, volunteerism). **Include your contributions within the ANS either locally or at the national level.**

ANS contributions are highly weighted

### Employment

List any relevant and appropriate work experience (including military). Start with your most recent position and work backward. Include your principal duties, accomplishments, and special equipment used.

**EXAMPLE: Name of Employer, Position, Start MM/YYYY - End MM/YYYY\***

EXAMPLE: Name of Employer, Position, Start MM/YYYY - End MM/YYYY

Max Number of Words: 250

## References



## Reference #1

List two people, preferably supervisors and/or faculty members in your field of study, who are familiar with your qualifications. These people will be requested to provide a reference for you.

Contact's First Name \*

Contact's Last Name \*

Contact's Email \*

Contact's Phone Number

Contact's Title

Contact's Organization

## Reference #2

Please list a person who is qualified (preferably a supervisor and/or faculty member)

Contact's First Name \*

Contact's Last Name \*

Contact's Email \*

Contact's Phone Number

Contact's Title

Contact's Organization

## Personal Statement

Describe in 500 words or less what made you choose a nuclear related STEM career (science, technology, engineering, mathematics).

**Address the following questions in your statement:**

In what aspect of nuclear science, technology, engineering do you plan to concentrate, and why?

How far do you expect to go with your formal education, and why?

If you are not pursuing a nuclear engineering degree or emphasis, describe how your degree ties in to nuclear.

\*

Max Number of Words: 500

## Diversity, Equity and Inclusion

### Statement on Diversity, Equity and Inclusion

The American Nuclear Society is dedicated to promoting and supporting the participation of underrepresented or marginalized groups within the Society. Such groups include, but are not limited to: women, persons of color, members of the LGBTQ+ community, persons with disabilities, and other underrepresented groups.

To help us gauge if we are successful in our recruiting efforts, you are encouraged to answer the following optional questions. However, you may decline without compromising your application. Evaluators do not see the data collected in this section.

**Are you willing to participate in this optional questionnaire?**

\*

- No  
 Yes

### Diversity, Equity and Inclusion Questionnaire

Are you a first-generation college student? (defined as neither parent has a 4-year college degree from a U.S. university)

- No
- Yes

Are you a veteran of the U.S. armed forces?

- No
- Yes

I identify my Race/Ethnicity as:

(Please check any/all that apply)

- African
- American Indian or Alaskan Native
- Asian
- Black (Non-Hispanic)
- Hispanic/Latino
- Middle Eastern
- Pacific Islander
- Prefer not to answer
- White (Non-Hispanic)
- Other

I identify my gender as:

(Please check any/all that apply)

- Female (cis)
- Male (cis)
- Non-binary
- Prefer not to answer
- Transgender
- Other

I identify my sexual orientation as:

(Please check any/all that apply)

- Bi
- Gay
- Hetero
- Lesbian
- Pan
- Prefer not to answer
- Other

I have the following physical disability:

(Please check any/all that apply)

- Blindness
- Cancer
- Deafness
- Diabetes
- Loss of limb
- Lupus
- Lyme Disease
- Multiple Sclerosis (MS)
- None
- Prefer not to answer
- Wheelchair bound
- Other

I have the following cognitive, behavioral, or emotional disabilities:

(Please check any/all that apply)

- ADHD - Attention Deficit Hyperactivity Disorder
- Anxiety Disorder
- Autism or Asperger's
- Bipolar Disorder
- Depression
- None
- Prefer not to answer
- PTSD - Post Traumatic Stress Disorder
- Schizophrenia
- Other

