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:
   ____________________________________________________  ___Community College
   ____________________________________________________  ___4-year College
   ____________________________________________________  ___University
   ______________________________ZIP___________________  ___Other ________________________
   Work Tel: ____________________________  Work Fax: ________________________________
   (area code)                             (area code)

4. Residential Address:     Home Tel: ______________________________________________________
   ___________________________________________________  Desired Mailing Address:   
   ___________________________________________________  ___Work ___Home
   ______________________________ZIP_________________

E-mail address: ____________________________________

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

<table>
<thead>
<tr>
<th>Dates</th>
<th>Employer</th>
<th>Nature of Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expected position next year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current position 2002-03</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prior Position</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

***********************

--------------------
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:

<table>
<thead>
<tr>
<th>Institution</th>
<th>State</th>
<th>Year</th>
<th>Degree</th>
<th>Major Subject</th>
<th>Minor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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.