

**Applicant Information**

**ICIS Founding Generation Summer Internship Program**

First Name:

Last Name:

E-mail:

College/University:

City, Country:

Class year:   
Major:

Permanent home address:

To facilitate tracking of applicant characteristics, please answer questions below. Answering these questions is not required (awards are made on the basis of the quality of the proposed research plan and the applicant’s academic merits). However, we appreciate any information that you are willing to provide.

Your race:

Your ethnicity:

Your primary language:  
Are you a first-generation college attendee?

Do you currently receive need-based financial support for attending college?

Title of Project:

Letter of recommendation—Home faculty member’s name:

Letter of support—Mentor’s name:

Letter of support—Mentor’s institution:

Total Amount requested: