

Name & SSN:
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## STUDENT APPLICATION

**I. THIS CHECKLIST IS REQUIRED TO BE AT THE FRONT OF EACH APPLICANT PACKAGE, AND SIGNED OFF BY THE STUDENT APPLICANT AND THE PI.**

1. Provide address at school and permanent address as well (if different)  
 Student Name: \_\_\_\_\_ Perm.Address: \_\_\_\_\_  
 School Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ Perm. Ph.# \_\_\_\_\_
2. Student Phone number: \_\_\_\_\_; cell: \_\_\_\_\_
3. Student Email Address: \_\_\_\_\_

ACTIVITY/QUESTION	ANSWER	ITEM IS INCLUDED (Y/N)	STUDENT INITIALS	P.I. INITIALS
CURRENT U.S. Citizen				
Transcript(s) provided				
GPA – <i>provide in next column</i>				
Current Scholarship Student re-applying: Package contains 1 Letter from PI/Department				
New Applicant: Two References are provided in accordance with instructions.				
<b>Currently enrolled, or accepted</b> for enrollment, at the following Center of Academic Excellence in Information Assurance Education (CAE/IAE):				
ANTICIPATED <b>FINAL</b> GRADUATION DATE (Example, if you are <u>currently a senior, but proceeding into a Master’s program</u> , you would indicate the graduation date from the master’s program, NOT your senior year date).				

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ACTIVITY/QUESTION	ANSWER	ITEM IS INCLUDED (Y/N)	STUDENT INITIALS	P.I. INITIALS
<b>RESUME – Package will be deemed incomplete without one. Reference such things as awards (including scouts, church, etc; CNSS &amp; other certifications; work experience).</b>				
Enclosed separate sheet (as indicated in Section II_ of highlights of awards, honors, etc.				
Veteran Status (yes/no):				
<i>If yes to above, indicate whether 5 or 10 year status</i>				
<i>If yes to Veteran Status indicated, proof of eligibility contained herein (yes/no):</i>				
OF 612 Supplemental Information Chart filled in and provided				
OF612 Supplemental Competency Statement				
Supplemental Statement of General Academic and Employment Conditions				
Pages 1 – 11, Student Application, are to be submitted along with any supplemental information.				

Student Signature \_\_\_\_\_

Student Printed Name: \_\_\_\_\_

Student SSN: \_\_\_\_\_

P.I. Signature: \_\_\_\_\_

P.I. Printed Name: \_\_\_\_\_

Name & SSN:

## II. Supplemental Information

A. Applicants for the Information Assurance Scholarship and Student Career Experience Program must provide certain information about their academic standing to enable a review of academic sufficiency by the appropriate Center of Academic Excellence in Information Assurance Education (college or university). This section contains the required supplemental information requirements. You **MUST** provide ALL of the information required below to receive full consideration. You must obtain and attach certain additional materials to this statement for it to be complete. **All information and material that you attach to this statement shall become part of your Application for Federal Employment.**

B. Provide complete responses to all information requirements, as applicable to you, and attach the additional documents required. When you are finished, sign and date this statement in the area provided.

QUESTION	ANSWER
<b>Beginning in Academic Year 2004-2005</b> , I will enter the following: Junior, Senior, 1 <sup>st</sup> Year Masters, 2 <sup>nd</sup> Year Masters; 1 <sup>st</sup> Year PhD, 2 <sup>nd</sup> Year PhD, 3 <sup>rd</sup> Year PhD.	<i>(Select from the choices and enter here – if certificate or other, please describe)</i>
<b>Declared Major (and minor if applicable) is:</b>	
Number of college credits earned to date:	
Total number of credits required for graduation (from the final degree):	
I am a resident of the state of _____ for tuition purposes	<i>(Fill in the state or U.S. Territory)</i>
My Academic Advisor's name and phone number is:	
My highest ACT or SAT Scores are:	_____ (V) _____ (M)
My highest GRE Scores are:	_____ (V) _____ (Q) _____ (A)

C. I have listed all colleges or universities I have attended in Section 2 below, starting with the current institution in which I am enrolled (or accepted for enrollment) as of the date of this statement, and have provided the necessary transcripts (official or unofficial).

Institution	City, State	Dates Attended	Degrees Earned (or Expected)
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GPA/Base at the foregoing institution: \_\_\_\_\_ / \_\_\_\_\_

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Name & SSN: \_\_\_\_\_

GPA/Base at the foregoing institution: \_\_\_\_\_ / \_\_\_\_\_

GPA/Base at the foregoing institution: \_\_\_\_\_ / \_\_\_\_\_

(if necessary, provide additional institution information on a separate sheet attached to this).

**Separate sheet highlighting recognitions, honors and awards: Attached a plain 8 1/2" X 11" paper with name and social security number, and described any academic recognition (certifications included), honors, distinctions, or awards that you have received. This is very important, as it counts towards the evaluation criteria.**

*NOTE*

*The recognition, honors, distinctions, or awards that you describe in this supplemental statement **need not be job-related.***

*Be sure that you include any scholarships, membership in any honorary societies to which you were admitted because of academic accomplishment, and any significant leadership roles in academic groups, organizations, societies, or associations to which you were nominated or elected.*

*Provide sufficient **summary** information for others to understand the period or date of the accomplishment, the institution or organization awarding it, and what you did to earn it.*

**DO NOT** attach copies of degrees, certificates, other commemorative memorabilia, compositions or publications, unless it is not possible for others to understand the nature of your accomplishment by reading your summary description. None of the materials attached to your OF612 will be returned to you.

D. You must attach two (2) Letters of Reference to this supplemental statement from persons knowledgeable of your potential for successful learning, as well as your knowledge and ability. At least one of these letters must be from a current faculty member (or a most current faculty member), and the second letter may be from either a current or former faculty member, or a current or former employer. Each letter contains the name, position or title, telephone number, email address, and institutional or organizational address of the referee. **In addition, you must request that each referee refer to and address the following factors:**

1. The relationship of the referee to you. (The referee states whether the information is based on an academic or employment relationship.)
2. The length of the relationship. (The referee states how long he or she has known you.)

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3. An assessment of your potential for academic success and fulfillment of degree requirements. (Advise your referees that your college or university will base a determination of your academic sufficiency, in part, on the letters of reference that you submit.)

4. An **assessment of your knowledge and ability in the following six (6) competency areas:**

- a. Knowledge of the techniques of the information security discipline, including encryption, access control, physical security, training, threat analysis, and authentication.
- b. Knowledge of the human factors in information security, including human computer interaction, design, training, sabotage, human error prevention and identification, personal use policies, and monitoring.
- c. Ability to identify and analyze problems, distinguish between relevant and irrelevant information to make logical decisions, and provide solutions to individual and organizational problems.
- d. Ability to consider and respond appropriately to the needs, feelings, and capabilities of different people in different situations; is tactful, compassionate and sensitive, and treats others with respect.
- e. Ability to make clear and convincing oral presentations to individuals or groups; listens effectively and clarifies information as needed; facilitates an open exchange of ideas and fosters an atmosphere of open communication.
- f. Ability to express facts and ideas in writing in clear, convincing and organized manners appropriate to the audience and occasion.

**E;. By signing this supplemental statement, I acknowledge that the information given above is true and correct:**

Your Name (Type or Print): \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Your Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**F. OF612 - OPTIONAL APPLICATION FOR FEDERAL EMPLOYMENT  
SUPPLEMENTAL COMPETENCY STATEMENT**

**On plain 8 1/2" X 11" paper, titled as above, describe your knowledge and ability in each of the six (6) competency areas below. You must address each area identified. If you do not provide this information your package will be deemed non-responsive.** Indicate your name and social security number on each page. Limit your responses on all six competency areas to a total of three pages. **DO NOT** attach copies of degrees, certificates, awards, compositions, publications, or commemorative memorabilia. None of the materials attached to your OF612 will be returned to you.

a. Knowledge of the techniques of the information security discipline, including encryption, access control, physical security, training, threat analysis, and authentication.

b. Knowledge of the human factors in information security, including human computer interaction, design, training, sabotage, human error prevention and identification, personal use policies, and monitoring.

c. Ability to identify and analyze problems, distinguish between relevant and irrelevant information to make logical decisions, and provide solutions to individual and organizational problems.

d. Ability to consider and respond appropriately to the needs, feelings, and capabilities of different people in different situations; is tactful, compassionate and sensitive, and treats others with respect.

e. Ability to make clear and convincing oral presentations to individuals or groups; listens effectively and clarifies information as needed; facilitates an open exchange of ideas and fosters an atmosphere of open communication.

f. Ability to express facts and ideas in writing in clear, convincing and organized manners appropriate to the audience and occasion.

**G. OF612 - OPTIONAL APPLICATION FOR FEDERAL EMPLOYMENT  
SUPPLEMENTAL STATEMENT OF GENERAL ACADEMIC  
AND  
EMPLOYMENT CONDITIONS**

To be considered for the Information Assurance Scholarship and Student Career Experience Program, you must agree to certain academic standards and conditions of employment. This OF612 supplement describes those conditions. Read this statement carefully, and indicate your elections, where appropriate. When you understand all of the conditions completely, and agree with all of them, sign and date the statement, and include it with your Resume and OF612 Supplemental information.

6. In order to receive financial assistance (a scholarship) or appointment under the Information Assurance Scholarship and Student Career Experience Program, you must be enrolled (or accepted for enrollment) at one of the institutions of higher education designated by the National Security Agency as a Center of Academic Excellence, or enrolled (or accepted for enrollment) in an institution selected by a Center of Academic Excellence as a collaborating partner in the Information Assurance Scholarship Program. Formatted: Bullets and Numbering
7. In order to receive financial assistance (a scholarship) or appointment under the Information Assurance Scholarship and Student Career Experience Program, the Center of Academic Excellence at which you are enrolled (or accepted for enrollment) must submit a successful grant proposal to the Department of Defense to establish the Information Assurance Scholarship Program on your campus.
8. In order to receive financial assistance (a scholarship) or appointment under the Information Assurance Scholarship and Student Career Experience Program, you must be enrolled (or accepted for enrollment) in a full-time program leading to an undergraduate or masters degree, a graduate certificate or doctoral degree, and pursuing a course of study and/or have a declared major in one of the scientific, technical or managerial disciplines related to computer and network security, with a concentration in an information assurance function. (In accordance with 5 CFR 213.3202(b)(2), an individual who needs to complete less than the equivalent of half an academic course load in the class enrollment period immediately prior to graduating is still considered a student for purposes of this program.) Formatted: Bullets and Numbering
- a. For these purposes, the scientific, technical and managerial disciplines related to computer and network security are:
- i. Mathematics
  - ii. Biometrics
  - iii. Electrical Engineering
  - iv. Electronic Engineering
  - v. Computer Science
  - vi. Computer Engineering
  - vii. Software Engineering
  - viii. Computer Programming
  - ix. Computer Support
  - x. Data Base Administration
  - xi. Computer Systems Analysis

- xii. Operations Research
  - xiii. Information Security (Assurance)
  - xiv. Business Management or Administration
- b. For these purposes, the information assurance functions are:
- i. System/Network Administration and Operations
  - ii. Systems Security Engineering
  - iii. Information Assurance Systems and Product Acquisition
  - iv. Cryptography
  - v. Threat and Vulnerability Assessment, to include Risk Management
  - vi. Web Security
  - vii. Operation of Computer Emergency Response Teams
  - viii. Information Assurance Training, Education and Management
  - ix. Computer Forensics
  - x. Defensive Information Systems

9. If you are an undergraduate student, you must maintain an overall 3.0 out of a 4.0 grade point average (or an analogous rank based on a comparable scale) in order to receive financial assistance (a scholarship) under the Information Assurance Scholarship Program. If you are a graduate student, you must maintain an overall 3.2 out of a 4.0 (or an analogous rank based on a comparable scale) in order to receive financial assistance (a scholarship). Failure to maintain these minimum grade point averages constitutes grounds for immediate termination of financial assistance and your appointment under the Information Assurance and Student Career Experience Program.

10. Except for small achievement awards (not to exceed \$2,000 in any academic year), you may not accept simultaneous remuneration from another scholarship or fellowship while receiving financial assistance under the Information Assurance Scholarship Program. If you are in a graduate program, you may receive a reasonable amount of remuneration for teaching or similar activities as are, in the institution's opinion, contributory to your academic progress. Except where state or local law, court or proper administrative order declares otherwise, the Department of Defense shall assume that the development of students, not service to the academic institution, will govern the assignment of these activities.

11. In order to receive financial assistance (a scholarship) under the Information Assurance Scholarship Program, you must agree to accept a federal appointment under the Student Career Experience Program. You may be appointed under this program as a GS-4, GS-5, GS-7, or GS-9, based on your qualifications, and the needs and conditions of the appointing defense component. During your period of service under this appointment, you must accept and perform intern assignments designed to enhance your academic studies in information security. These assignments will be scheduled at times mutually agreeable to you, your school, and the Department of Defense component that appoints you. If you are appointed under the SCEP program, vs. another agency internship program, you will be required to perform 640 hours of work, prior to graduation.

12. In order to receive financial assistance (a scholarship) under the Information Assurance Scholarship Program, you must agree to work for the Department of Defense, after the award of your degree, as a civilian\* employee for 8



one calendar year for each academic year, or partial year, for which financial assistance (scholarship) is received. \*See paragraph 8 for terms of Reserves/National Guard, should you desire this option. This requirement is called "obligated service". The work you perform during internship under the Student Career Experience Program DOES NOT COUNT toward satisfaction of your obligated service requirement.

13. Should you desire to work for the Department of Defense in the Reserves or National Guard, you must agree to the obligated service terms of two for one in order to receive financial assistance (a scholarship) under the Information Assurance Scholarship Program. "If you are interested in the National Guard or Reserves as a means to meeting your obligated service requirements, please indicate this in Section 10 and at the bottom of this application .

14. In order to receive financial assistance (a scholarship) or appointment under the Information Assurance Scholarship and Student Career Experience Program, you must agree to be mobile. On appointment under the Student Career Experience Program, you will be required to sign an agreement to accept assignments that involve travel or changes in duty stations, assignments in different organizations, assignments in different functional areas, and assignments in different geographic areas, during your internship AND during your incumbency of any permanent, full-time position to which you are converted on program completion. Your travel under this agreement, and the travel of all Department of Defense civilian employees, is governed by the Federal Travel Regulations and the Department of Defense Joint Travel Regulations. These regulations provide for travel benefits, and pay or reimbursement of your travel expenses, on an incidental, case-by-case basis; it is not possible to specify your exact entitlement to travel benefits at this time.

15. The Department of Defense **does not guarantee** that your preferences for agency assignment under the DoD Scholarship (or Student Career Experience Program), or in a permanent position to which you are subsequently converted, can be honored. Your preferences will be taken into account, along with all other relevant factors such as: mission, functional, and staffing requirements; the exigencies of service; the availability of funds; and, any hardships you may demonstrate. Nonetheless, your agency preferences are important to the department. Therefore, you may specify up to three agency preferences below, if you wish. You are not required to complete these preference selections. You may specify city and state of preference, if know as well. For information on Department of Defense Agencies, you may view the following web site which contains the Office of the Secretary of Defense, Defense Agencies and DoD Field Activities, Organization and Functions Guidebook: <http://www.defenselink.mil/odam/omp/pubs/GuideBook/ToC.htm> You may also see the following for additional DoD information: <http://www.defenselink.mil/home/aboutdod.html>

- I. My first choice for DoD Agency/Component is: \_\_\_\_\_  
 II. My second choice for DoD Agency/Component is \_\_\_\_\_.  
 III. My third choice for DoD Agency/Component is: \_\_\_\_\_.

16. In order to receive financial assistance (a scholarship) under the Information Assurance Scholarship Program, you must agree to reimburse the

United States should you voluntarily terminate your employment with the Department of Defense before the end of your period of obligated service. (See also item 7 above.) Should you terminate your appointment under the Information Assurance Scholarship Program or the Student Career Experience Program, decline or refuse to honor your commitment to accept permanent employment, or, voluntarily terminate permanent employment before you have fulfilled your period of obligated service, you must reimburse the United States, in whole or in part, the cost of the financial (scholarship) assistance provided to you. An obligation to reimburse under this condition of employment is for all purposes considered to be a debt owed to the United States.

- 17.** In order to receive financial assistance (a scholarship) or an appointment under the Information Assurance Scholarship and Student Career Experience Program, **you must agree to sign certain forms authorizing a background investigation to permit the appointing agency to make a determination as to your suitability for federal employment.**
- 18.** **You will be required to obtain and maintain eligibility for a security clearance in order to receive financial (scholarship) assistance or an appointment under the Information Assurance Scholarship and Student Career Experience Program. You may be required to undergo certain tests, including drug and polygraph tests, to obtain and maintain a clearance. Before awarding you a scholarship or hiring you, you will be required to complete certain forms to initiate the security clearance process.** Some of these forms will require that you reveal extensive information about your background, such as potentially sensitive information about your financial circumstances and any arrests and/or convictions for offenses of any kind. You must agree to all of these conditions of employment and you must complete these forms as a condition of financial assistance and appointment.
- IV. *Current web pages from OPM and DSS are provided below. These are provided for your review and consideration in determining whether you believe you will be eligible for a security clearance. They may not be all inclusive, however, it is highly recommended you review and understand the requirements prior to signing up to participate in the DoD IASP.*
- <http://www.opm.gov/extra/investigate/security-clearance.asp>
  - <http://www.dss.mil/psi/psifaq.pdf>
- V. *The following web page contains additional information from a U.S. military web site about security clearances which also may be useful to you when determining whether you will be eligible for a security clearance:*

Name & SSN:

- <http://usmilitary.about.com/library/milinfo/security/blsecuritymenu.htm>

**By signing this OF612 Supplemental Statement of General Academic and Employment Conditions, I acknowledge that I have read, understand, and agree to all of its conditions, to include the Security Clearance Requirements:**

Name (printed): \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ I would be interested in the Reserves or National Guard participation as a means to meeting my obligated service requirements.