Appendix A2

LSAMP Bridge to the Doctorate Data Collection Screens

LOUIS STOKES ALLIANCES FOR MINORITY PARTICIPATION

Bridge to the Doctorate Program
Annual Survey

Welcome

Welcome to LSAMP BD Web, the online data reporting system for the Louis Stokes Alliances for Minority Participation Bridge to the Doctorate Initiative. LSAMP BD Web allows you to provide the National Science Foundation (NSF) with reliable annual data. To enter LSAMP BD Web, please enter your institution's unique user ID and password in the boxes below and click on **Login**.

Login

User ID: [_____]

Password: [_____]

[**Login**]

[Password trouble?](#)

The system is closed for maintenance each Wednesday from 5:30 p.m. to 7:30 p.m. eastern time.

Notice: The system will log you out after 1 hour of inactivity. If you are logged out, you will need to reenter your user ID and password to return to LSAMP BD Web.

DID YOU FORGET YOUR USER ID OR PASSWORD?

Enter your e-mail address below and click on **Submit.** We will send your user ID and password to you.

E-mail: [_____] [Submit]

This feature is available only if you have previously logged in to LSAMP BD Web and provided us with your e-mail address. If you did not receive any login information or have not yet provided us with your e-mail address, please e-mail us at lsampbd@qrc.com or call toll free at (866) 227-7127.

LSAMP BD INITIATIVE DESCRIPTION

The LSAMP BD Initiative funds the initial 2 years of graduate study at LSAMP Alliance institutions. This activity will broaden participation through the attraction of underrepresented minority students in science, technology, engineering, and mathematics (STEM) disciplines.

SURVEY PRIVACY

Information from this data collection system will be retained by the NSF, a Federal agency, and will be an integral part of its Privacy Act System of Records in accordance with the Privacy Act of 1974 and maintained in the Education and Training System of Records 63 Fed. Reg. 264, 272 (January 5, 1998). These are confidential files accessible only to appropriate NSF officials, their staffs, and their contractors responsible for monitoring, assessing, and evaluating NSF programs. Only data in highly aggregated form, or data explicitly requested as "for general use," will be made available to anyone outside of the NSF for research purposes. Data submitted will be used in accordance with criteria established by NSF for monitoring research and education grants, and in response to Public Law 99-383 and 42 USC 1885c. The Social Security number (SSN) will be maintained in accordance with the requirements of the Privacy Act of 1974. Submission of the SSN is voluntary. It is used for survey quality control, program evaluation, and matching with other datasets maintained in the Education and Training System of Records 63 Fed. Reg. 264, 272 (January 5, 1998).

PUBLIC BURDEN

OMB# 3145-0136
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LOUIS STOKES ALLIANCES FOR MINORITY PARTICIPATION

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July 1, 2006–June 30, 2007   ZQRC Test University YX | Logout

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Main Menu » BD Students » Student Menu » Baseline Data

Baseline Data

STUDENT: MARIE BARRON

Previous name

(If the student's last name has changed since attaining the baccalaureate degree)

LSAMP institution (the student was enrolled in)

Arkansas State University

LSAMP alliance (the institution was associated with)

Mid-South

Social Security number

Student ID at the Institution

Gender

⦿ Male ◯ Female ◯ Not reported

Ethnicity

Not Hispanic or Latino

Race (choose one or more)

☐ American Indian or Alaska Native

☐ Asian

☑ Black or African American

☐ Native Hawaiian or Other Pacific Islander

☐ White

☐ Not reported

Disability (choose one or more)

☐ Hearing impairment

☐ Mobility or orthopedic impairment

☐ Visual impairment

☐ Other (please specify): [_____]

☐ None

☐ Not reported

Citizenship

[U.S. Citizen/U.S. National ▼]

If "Other" is selected, please specify: [_____]

Date of bachelor's degree

Month: [June ▼]   Year: [2005 ▼]

Undergraduate major (choose one or more)

☑ Agricultural Science

☑ Chemistry

☑ Computer Science

☑ Engineering

☑ Environmental Science

☑ Geosciences

☑ Life/Biological Sciences

☑ Mathematics

☑ Physics/Astronomy

☐ Other (please specify): [_____]

Undergraduate GPA

[3.7____]

Undergraduate GPA Scale

◉ **4 Point scale**   ○ **5 Point scale**

LSAMP Level I or II status

◉ **Level I**   ○ **Level II**

Research experience during the undergraduate program?

○ **Yes**

◉ **No**

GRE scores

Verbal: [_____]

Quantitative: [_____]

Analytical: [_____]

Date entered the STEM graduate program

Month: [-- Choose one ▼]   **Year:** [2004 ▼]

Date began receiving BD funding

Month: January ▼   **Year:** 2004 ▼

Graduate work prior to receiving LSAMP BD funding

Did this student complete any graduate work before receiving LSAMP BD funding?

◉ Yes

○ No

If yes, please provide the following data:

Broad field area

Education ▼

If "Other" is selected, please specify: [   ]

Field

Physical education/coaching ▼

Degree

Master's (including M.B.A.) ▼

If "Other" is selected, please specify: [   ]

Date degree awarded

Month: May ▼   **Year:** 2005 ▼

If no prior graduate degrees please provide the number of graduate credits completed prior to receiving LSAMP BD funding 0

Teaching assistantship awarded prior to receiving LSAMP BD funding?

◉ Yes

○ No

○ Not applicable

Research assistantship awarded prior to receiving LSAMP BD funding?

○ Yes

○ No

◉ Not applicable

[Save]   [Cancel]

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Annual Data

MARIE BARRON

Graduate program

[   ]

Intended broad major area

[-- Choose one -- ▼]

If "Other" is selected, please specify: [   ]

Intended major

[-- Choose one ▼]

Intended degree (choose one or more)

☐ No specific degree or certificate

☐ Postbaccalaureate certificate

☐ Master's (including M.B.A.)

☐ Post-Master's certificate

☐ Doctorate (Ph.D., D.S.C., D.Sc., Ed.D.)

☐ Other professional degree (J.D., L.L.B., Th.D., M.D, D.D.S., etc.)

☐ Other (please specify): [   ]

Amount of support received during the current reporting period (July 1, 2006–June 30, 2007)

[   ]

Disbursement method

[-- Choose one ▼]

Is the stipend or payment based on academic performance

○ Yes

○ No

Did the LSAMP BD funding end for this student during the current reporting

period (July 1, 2006–June 30, 2007)?

○ Yes
○ No

If yes, please provide the date funding ended.

Month: -- Choose one ▼   Year: -- Choose one ▼

Number of graduate course credits completed during the current reporting period (July 1, 2006–June 30, 2007)

[   ]

Teaching assistantship awarded during the current reporting period (July 1, 2006–June 30, 2007)

○ Yes
○ No
○ Not applicable

Research assistantship awarded during the current reporting period (July 1, 2006–June 30, 2007)

○ Yes
○ No
○ Not applicable

Year entered Ph.D. track (please use the definition below)

(completed 2 years of graduate coursework, equivalent to M.A. or M.S. and entered third year of graduate coursework, i.e., post M.S. and into Ph.D. track)

-- Choose one ▼

Thesis proposal - date approved (thesis not required)

Month: -- Choose one ▼   Year: -- Choose one ▼

Master's degree - date awarded

Month: -- Choose one ▼   Year: -- Choose one ▼

Ph.D. qualifying examinations - date passed

Month: -- Choose one ▼   Year: -- Choose one ▼

Ph.D. candidacy - date attained

Month: -- Choose one ▼   Year: -- Choose one ▼

Dissertation defense - date passed

Month: -- Choose one ▼   Year: -- Choose one ▼

Doctoral dissertation - date approved

Month: -- Choose one ▼   Year: -- Choose one ▼

Doctoral degree - date awarded

Month: [-- Choose one ▼]   Year: [-- Choose one ▼]

Doctoral dissertation abstract

[text area]

Did the student receive post-LSAMP BD funding to continue graduate studies during the current reporting period (July 1, 2006–June 30, 2007)?

○ Yes

○ No

If yes, please provide the funding source.

[-- Choose one ▼]

Did the student leave the program or drop out during the current reporting period (July 1, 2006–June 30, 2007)?

○ Yes

○ No

Date left or dropped out

Month: [-- Choose one ▼]   Year: [-- Choose one ▼]

If he or she left, was it to continue the Ph.D. elsewhere?

○ Yes

○ No

○ Do not know

If yes, please provide the following information:

Transfer date   Month: [-- Choose one ▼]   Year: [-- Choose one ▼]

Institution name [_____]

Permanent Contact Information

Please provide the permanent contact information for this student.

Student's personal e-mail address
(other than his or her current school address, if available)

[_____]

Address

[_____]

City

[_____]

State
(If address is not in the United States, select "Non-U.S.")

Choose one ▼

ZIP Code

Country

Phone (xxx-xxx-xxxx)   **Ext.**

Other Contact Information

Name and address (U.S. postal and e-mail) of a person likely to know how to reach this student after he or she graduates.

Name

Relationship to this student

E-mail address

Address

City

State
(If address is not in the United States, select "Non-U.S.")

Choose one ▼

ZIP Code

Country

Phone (xxx-xxx-xxxx)   **Ext.**

Save   Cancel

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Followup Data

MARIE BARRON

Postdoctorate appointment

Has the individual received a postdoctorate appointment?

○ Yes

○ No

If yes, please complete the following items:

Date   Month: -- Choose one ▼   Year: -- Choose one ▼

Institution [   ]

Department [   ]

Field   [   ]

Current Employment

Is the individual currently employed?

○ Yes

○ No

If yes, please answer the following questions about this individual's main job:

When did the individual begin this job?

Month: -- Choose one ▼   Year: -- Choose one ▼

Is this job fulltime?

○ Yes

○ No

Employer type

Which of the following categories best describes this individual's employer for this job? (choose one or more)

☐ A private, for-profit company, business, or individual paying wages, salary, or commissions

☐ A private not-for-profit, tax-exempt, or charitable organization

☐ Self-employment in own not incorporated business, professional practice, or farm

☐ Self-employment in own incorporated business, professional practice, or farm

☐ Local government (e.g., city, county)

☐ State government

☐ U.S. military service, active duty, or commissioned corps (e.g., USPHS, NOAA)

☐ U.S. Government as a civilian employee

☐ Other (please specify): [＿＿＿＿＿＿＿]

Employment sector

Regarding this individual's employer's main business (i.e., what the employer makes or does), please indicate the single category that best fits the employer's main business. If the employer has more than one type of business, please answer for the type of work primarily performed at the location where this individual works.

[-- Choose one ▼]

If "Research" or "Other" is selected, please specify: [＿＿＿＿＿]

Position/job title (broad category)

[--Choose one ▼]

If "Other" is selected, please specify: [＿＿＿＿＿]

Position/job title

[-- Choose one -- ▼]

Is this job STEM related?

[--Choose one ▼]

Work in Education

Is the employer an educational institution?

○ Yes
○ No

If yes, answer the following questions:

Type of educational institution

[--Choose one ▼]

If "Other" is selected, please specify: [＿＿＿＿＿]

Faculty rank

[--Choose one ▼]

If "Other" is selected, please specify: [＿＿＿＿＿]

Tenure status

--Choose one ▼

Save   Cancel

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Baseline Data

STUDENT: THOMAS WILLIAMS

Student's name (First, MI, Last)

Thomas | | Williams

Bachelor's degree-awarding institution

Social Security number

Student ID at the Institution

Gender

⦿ Male ○ Female ○ Not reported

Ethnicity

Not Hispanic or Latino ▼

Race (choose one or more)

☐ American Indian or Alaska Native

☐ Asian

☐ Black or African American

☐ Native Hawaiian or Other Pacific Islander

☑ White

☐ Not reported

Disability (choose one or more)

☐ Hearing impairment

☐ Mobility or orthopedic impairment

☐ Visual impairment

☐ Other (please specify):

☐ None

☐ Not reported

Citizenship

| U.S. Citizen/U.S. National ▼ |

If "Other" is selected, please specify: [   ]

Date of bachelor's degree

Month: | June ▼ | Year: | 2004 ▼ |

Undergraduate major (choose one or more)

☐ Agricultural Science

☐ Chemistry

☑ Computer Science

☐ Engineering

☐ Environmental Science

☐ Geosciences

☐ Life/Biological Sciences

☐ Mathematics

☐ Physics/Astronomy

☐ Other (please specify): [   ]

Undergraduate GPA

| 3.8 |

Undergraduate GPA Scale

◉ 4 Point scale   ○ 5 Point scale

Research experience during the undergraduate program?

○ Yes

◉ No

GRE scores

Verbal: [   ]

Quantitative: [   ]

Analytical: [   ]

Date entered the STEM graduate program

Month: | -- Choose one ▼ | **Year:** | 2004 ▼ |

Date entered the current graduate program

Month: | April ▼ | **Year:** | 2004 ▼ |

Graduate work prior to entering the current graduate program

Did this student complete any graduate work before entering the current

graduate program?

⦿ **Yes**

○ **No**

If yes, please provide the following data:

Broad field area

[Computer and Information Sciences ▼]

If "Other" is selected, please specify: [   ]

Field

[Computer/systems ▼]

Degree

[No specific degree or certificate ▼]

If "Other" is selected, please specify: [   ]

Date degree awarded

Month: [-- Choose one ▼]   **Year:** [-- Choose one ▼]

If no prior graduate degrees please provide the number of graduate credits completed prior to entering the current graduate program [36]

Teaching assistantship awarded prior to entering the current graduate program?

○ **Yes**

⦿ **No**

○ **Not applicable**

Research assistantship awarded prior to entering the current graduate program?

○ **Yes**

⦿ **No**

○ **Not applicable**

[Save]   [Cancel]

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THOMAS WILLIAMS

Graduate program

[   ]

Intended broad major area

[-- Choose one --   ▼]

If "Other" is selected, please specify: [   ]

Intended major

[-- Choose one -- ▼]

Intended degree (choose one or more)

☐ No specific degree or certificate

☐ Postbaccalaureate certificate

☐ Master's (including M.B.A.)

☐ Post-Master's certificate

☐ Doctorate (Ph.D., D.S.C., D.Sc., Ed.D.)

☐ Other professional degree (J.D., L.L.B., Th.D., M.D, D.D.S., etc.)

☐ Other (please specify): [   ]

Number of graduate course credits completed during the current reporting period (July 1, 2006–June 30, 2007)

[   ]

Teaching assistantship awarded during the current reporting period (July 1, 2006–June 30, 2007)

○ Yes

○ No

○ Not applicable

Research assistantship awarded during the current reporting period (July 1, 2006–June 30, 2007)

○ Yes

○ No

○ Not applicable

Year entered Ph.D. track (please use the definition below)

(completed 2 years of graduate coursework, equivalent to M.A. or M.S. and entered third year of graduate coursework, i.e., post M.S. and into Ph.D. track)

[-- Choose one ▼]

Thesis proposal - date approved (thesis not required)

Month: [-- Choose one ▼]   Year: [-- Choose one ▼]

Master's degree - date awarded

Month: [-- Choose one ▼]   Year: [-- Choose one ▼]

Ph.D. qualifying examinations - date passed

Month: [-- Choose one ▼]   Year: [-- Choose one ▼]

Ph.D. candidacy - date attained

Month: [-- Choose one ▼]   Year: [-- Choose one ▼]

Dissertation defense - date passed

Month: [-- Choose one ▼]   Year: [-- Choose one ▼]

Doctoral dissertation - date approved

Month: [-- Choose one ▼]   Year: [-- Choose one ▼]

Doctoral degree - date awarded

Month: [-- Choose one ▼]   Year: [-- Choose one ▼]

Doctoral dissertation abstract

[   ]

Did the student leave the program or drop out during the current reporting period (July 1, 2006–June 30, 2007)?

○ Yes

○ No

Date left or dropped out

Month: [-- Choose one ▼]   Year: [-- Choose one ▼]

If he or she left, was it to continue the Ph.D. elsewhere?

○ Yes

○ No
○ Do not know

If yes, please provide the following information:

Transfer date Month: [-- Choose one ▼]   Year: [-- Choose one ▼]

Institution name [_____]

Permanent Contact Information

Please provide the permanent contact information for this student.

Student's personal e-mail address
(other than his or her current school address, if available)
[_____]

Address
[_____]

City
[_____]

State
(If address is not in the United States, select "Non-U.S.")
[Choose one ▼]

ZIP Code
[_____]

Country
[_____]

Phone (xxx-xxx-xxxx)   **Ext.**
[_____] [_____]

Other Contact Information

Name and address (U.S. postal and e-mail) of a person likely to know how to reach this student after he or she graduates.

Name
[_____]

Relationship to this student
[_____]

E-mail address
[_____]

Address

[   ]

City

[   ]

State
(If address is not in the United States, select "Non-U.S.")

[Choose one   ▼]

ZIP Code

[   ]

Country

[   ]

Phone (xxx-xxx-xxxx)   **Ext.**

[   ] [   ]

[Save]   [Cancel]

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THOMAS WILLIAMS

Postdoctorate appointment

Has the individual received a postdoctorate appointment?

○ Yes

○ No

If yes, please complete the following items:

Date   Month: [-- Choose one ▼]   Year: [-- Choose one ▼]

Institution   [   ]

Department   [   ]

Field   [   ]

Current Employment

Is the individual currently employed?

○ Yes
○ No

If yes, please answer the following questions about this individual's main job:

When did the individual begin this job?

Month: [-- Choose one ▼]   Year: [-- Choose one ▼]

Is this job fulltime?
○ Yes
○ No

Employer type

Which of the following categories best describes this individual's employer for this job? (choose one or more)

☐ A private, for-profit company, business, or individual paying wages, salary, or commissions

☐ A private not-for-profit, tax-exempt, or charitable organization

☐ Self-employment in own not incorporated business, professional practice, or farm

☐ Self-employment in own incorporated business, professional practice, or farm

☐ Local government (e.g., city, county)

☐ State government

☐ U.S. military service, active duty, or commissioned corps (e.g., USPHS, NOAA)

☐ U.S. Government as a civilian employee

☐ Other (please specify): [_____]

Employment sector

Regarding this individual's employer's main business (i.e., what the employer makes or does), please indicate the single category that best fits the employer's main business. If the employer has more than one type of business, please answer for the type of work primarily performed at the location where this individual works.

[-- Choose one ▼]

If "Research" or "Other" is selected, please specify: [_____]

Position/job title (broad category)

[--Choose one ▼]

If "Other" is selected, please specify: [_____]

Position/job title

[-- Choose one -- ▼]

Is this job STEM related?

[--Choose one ▼]

Work in Education

Is the employer an educational institution?

○ Yes
○ No

If yes, answer the following questions:

Type of educational institution

[--Choose one ▼]

If "Other" is selected, please specify: [_____]

Faculty rank

[--Choose one ▼]

If "Other" is selected, please specify: [_____]

Tenure status

--Choose one ▼

Save   Cancel