OMB Control #0693-XXXX

Expiration Date: XX/XX/XXXX

**National Cybersecurity Career Awareness Week Event and Activity Portal**

[\* indicates a required field]

Information collected on this page will be published to a public-facing web site on nist.gov/nice/nccaw.

**Contact Information**

**Name** \*

**Organization’s Name**\*

**Email Address**\*

**Phone Number** \* ###-###-####

**Website**

**Event or Activity Information**

**What type of event or activity are you planning** (select all that apply)?

* Issue a proclamation in support of National Cybersecurity Career Awareness Week
* Develop an Op-Ed or blog for your local media or social media outlets
* Develop and release a short video telling “your cybersecurity career story”
* Provide a blog, article, video, or other resources to the NICE Program Office
* Host an event
* Other (please describe)

**Event Title**\*

**Type of Event you plan to Host**\*

Open House/Facilities Tour

Event in community to present/talk about careers in cybersecurity

Job shadowing day or week

Careers exhibition

Career fair

Internship/externships/scholarship briefing

Classroom/School speaker

Classroom activities related to careers in cybersecurity

Other (please describe)

**Start Date of Event**\* MM / DD / YEAR

**Start Time of Event**\* HH : MM AM/PM

**End Date of Event**\* MM / DD / YEAR

**End Time of Event**\* HH : MM AM/PM

**Event Host Affiliation (example: Industry, Government, Non-Profit Organization, K12, Higher Education, Etc.)** \*

**How many attendees do you plan to impact?** \*

**How will you measure impact and success?**

**Description of the event**\*

**Is this event by-invite-only or open to the public?** \*

* Invitation Required
* Public

**Who is the primary target audience?** \*

* K12 students
* College/University students
* Parents
* Teachers/Faculty
* Administrators
* Job-seekers
* Employers
* Non-profit organizations

**Please provide the event location information below:**\*

**Event Location**

**Site Name**\*

**Street Address**\*

**Address Line 2**

**City**\*

**State**\*

**Postal/Zip Code**\*

**Country**

**Point of Contact**

**Name** First Last

**Email Address**

**Phone Number** ###-###-####

**Is this a multi-site event?**

* Yes
* No

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**MEASSAGE AFTER FINISHED:**

Thank you for your submission. Your event or activity will be added to our list shortly. Should you have any questions or concerns, please contact the NICE Program Office at [nccaw@nist.gov](mailto:nccaw@nist.gov).

Click here to go back to the event and activity list website.

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