



**Department of Defense (DoD)
National Defense Science and Engineering
Graduate (NDSEG)
Fellowship Program
2024 and 2025 Fellowship Classes**

**Ad Hoc: OMB Reporting – Application Collection
Instrument (CDRL A0009)**

Contract No. FA9550-23-F-0014

PREPARED BY:



Systems Plus, Inc.

**One Research Court
Suite 360
Rockville, MD 20850
(301) 948-4232
www.sysplus.com**

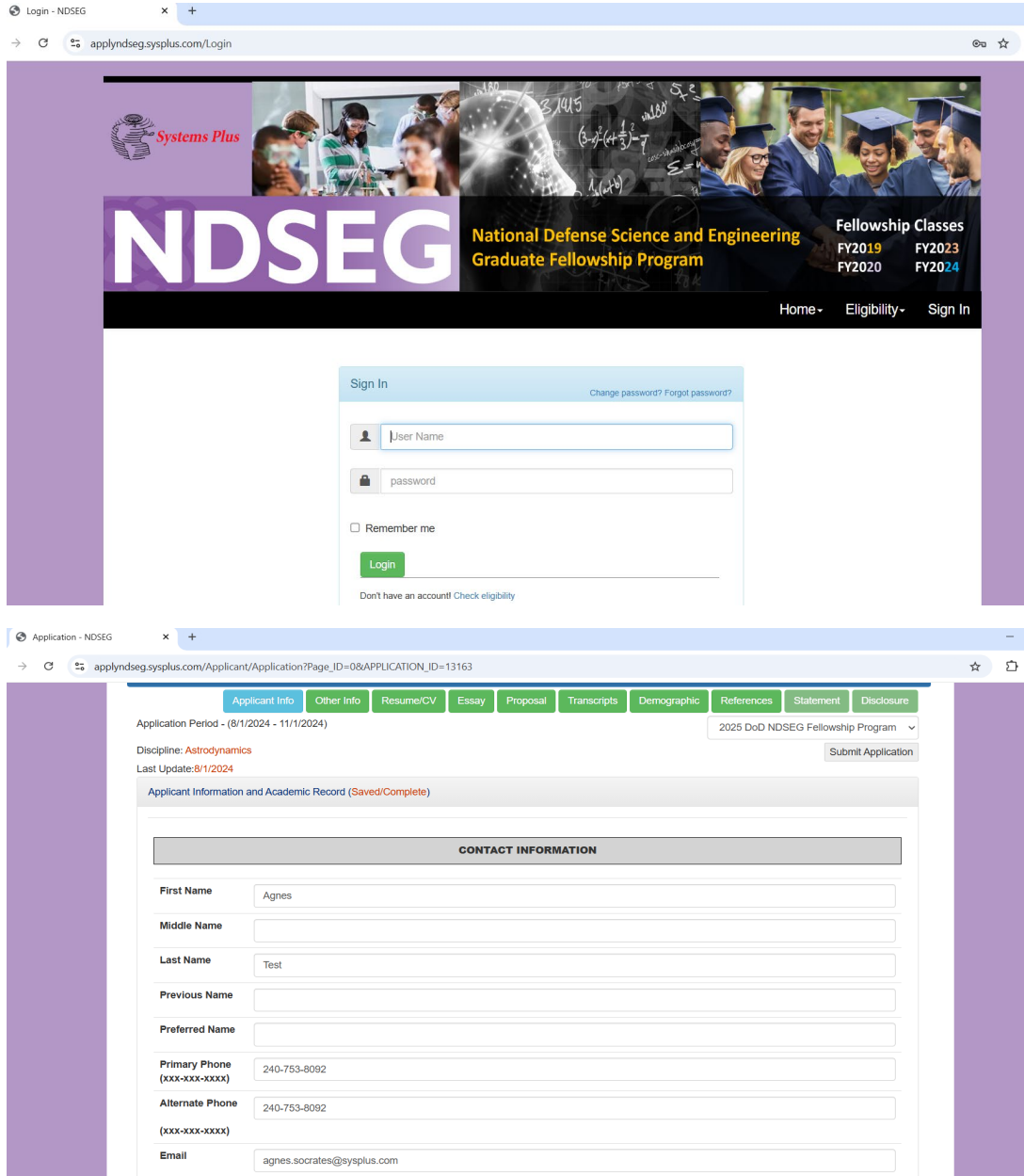
Version 1.1

For DoD NDSEG Program Official Use Only

Version Number	Implemented By	Revision Date	Approved By	Approval Date	Description of Change
1.1	Agnes Socrates	11/20/2024	Mounica Vangala	11/21/2024	<i>Updated current application collection based on new government requirements</i>

1. NDSEG Application Portal

This is a secured website where all applicants must submit their application materials such as personal information, academic information, resume or cv, proposals, essays, etc.



The image shows two screenshots of the NDSEG Application Portal. The top screenshot is the login page, and the bottom screenshot is the application form.

Top Screenshot: Login Page

URL: applyndseg.sysplus.com/Login

Header: **NDSEG** National Defense Science and Engineering Graduate Fellowship Program

Navigation: Home - Eligibility - Sign In

Sign In Form:

- Fields: User Name, password
- Remember me:
- Buttons: Login, Change password? Forgot password?
- Footer: Don't have an account? Check eligibility

Right Side Navigation:

Fellowship Classes	
FY2019	FY2023
FY2020	FY2024

Bottom Screenshot: Application Form

URL: applyndseg.sysplus.com/Applicant/Application?Page_ID=0&APPLICATION_ID=13163

Application Period: (8/1/2024 - 11/1/2024)

Discipline: **Aerodynamics**

Last Update: 8/1/2024

Application Period: 2025 DoD NDSEG Fellowship Program

Buttons: Applicant Info, Other Info, Resume/CV, Essay, Proposal, Transcripts, Demographic, References, Statement, Disclosure, Submit Application

Section: **CONTACT INFORMATION**

Fields:

- First Name: Agnes
- Middle Name:
- Last Name: Test
- Previous Name:
- Preferred Name:
- Primary Phone (xxx-xxx-xxxx): 240-753-8092
- Alternate Phone (xxx-xxx-xxxx): 240-753-8092
- Email: agnes.socrates@sysplus.com



We recommend the use of a personal email address vs. a university email. We will use this address to communicate application information including award status. It is the responsibility of the applicant to ensure that information can be received via email.

Street Address	<input type="text" value="DM"/>
City	<input type="text" value="DM"/>
State	<input type="text" value="District of Columbia"/>
Zip Code	<input type="text" value="20020"/>
Permanent Street Address	<input type="text" value="DM"/>
Permanent City	<input type="text" value="DM"/>
Permanent State	<input type="text" value="District of Columbia"/>
Permanent Zip Code	<input type="text" value="20020"/>

CITIZENSHIP INFORMATION

Citizenship Status	<input type="text" value="Yes"/>
Citizenship Type	<input type="text" value="U.S. Citizen"/>

APPLICATION DISCIPLINE AREA

The selection you make in this area will determine the discipline of the Subject Matter Experts on your review panel. Please select the most appropriate discipline relevant to your Degree and research proposal to ensure that your application is reviewed appropriately.

Discipline Area	<input type="text" value="Astrodynamics"/>
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Areas of interest that fall outside of the list may be considered if it is a STEM field and is related to one or more of these fields. If you need help selecting one of our supported disciplines, we recommend utilizing your academic or research advisor for guidance.



EDUCATION INFORMATION

Current Degree Program

Current University/Institution Name

Please click the name/link beside each checkbox below to see if your school appears on the list. If it does, please check the box beside the list name here.

- [HBCU \(Historically Black College/University\)](#)
- [MSI \(Minority-Serving Institution\)](#)
- [HSI \(Hispanic Serving Institution\)](#)
- [TI \(Tribal Institution\)](#)

Type the FULL name of your Undergraduate Institution. Please do not abbreviate (ie do not write U of AL, MIT, etc.)

Undergraduate Information

Institution Name

Please click the name/link beside each checkbox below to see if your school appears on the list. If it does, please check the box beside the list name here.

- [HBCU \(Historically Black College/University\)](#)
- [MSI \(Minority-Serving Institution\)](#)
- [HSI \(Hispanic Serving Institution\)](#)
- [TI \(Tribal Institution\)](#)



Type the FULL name of your Undergraduate Institution. Please do not abbreviate (ie do not write U of AL, MIT, etc.)

Was your undergraduate institution inside of the US? [Yes/No]	<input checked="" type="radio"/> Yes <input type="radio"/> No
City	Seattle
State	Washington
Are you currently enrolled or were you enrolled and graduated? [Yes/No]	<input checked="" type="radio"/> Yes <input type="radio"/> No
Student ID	012
Start Date of Attendance (Format = MM/YYYY)	10/2021
End Date of Attendance (Format = MM/YYYY)	05/2023
Major	Astrodynamics
Minor	DM

Graduate Information

Have completed OR are currently pursuing a Master's degree? [Yes/No]

Yes No

Please type the FULL name of your top three choices to pursue your Master's Degree and/or three that you have applied to:

Graduate School Choice 1

Please click the name/link beside each checkbox below to see if your school appears on the list. If it does, please check the box beside the list name here.

- [HBCU \(Historically Black College/University\)](#)
- [MSI \(Minority-Serving Institution\)](#)
- [HSI \(Hispanic Serving Institution\)](#)
- [TI \(Tribal Institution\)](#)

Graduate School Choice 2

Please click the name/link beside each checkbox below to see if your school appears on the list. If it does, please check the box beside the list name here.

- [HBCU \(Historically Black College/University\)](#)
- [MSI \(Minority-Serving Institution\)](#)
- [HSI \(Hispanic Serving Institution\)](#)
- [TI \(Tribal Institution\)](#)

Graduate School Choice 3

Please click the name/link beside each checkbox below to see if your school appears on the list. If it does, please check the box

Doctoral Program Information

Have you selected a PhD program and/or are currently progressing towards your degree.? [Yes/No]

 Yes No*Please type the FULL name of your top three choices to pursue your PhD and/or three that you have applied to:*

Doctoral School Choice 1

Please click the name/link beside each checkbox below to see if your school appears on the list. If it does, please check the box beside the list name here.

- [HBCU \(Historically Black College/University\)](#)
- [MSI \(Minority-Serving Institution\)](#)
- [HSI \(Hispanic Serving Institution\)](#)
- [TI \(Tribal Institution\)](#)

Doctoral School Choice 2

Please click the name/link beside each checkbox below to see if your school appears on the list. If it does, please check the box beside the list name here.

- [HBCU \(Historically Black College/University\)](#)
- [MSI \(Minority-Serving Institution\)](#)
- [HSI \(Hispanic Serving Institution\)](#)
- [TI \(Tribal Institution\)](#)

Doctoral School Choice 3

Please click the name/link beside each checkbox below to see if your school appears on the list. If it does, please check the box beside the list name here.

If for any reason an application does not contain all of the required elements, it will NOT be reviewed. It is the applicant's responsibility to ensure the completeness of their application. For more information, please Reference DoD NDSEG Website Application <https://ndseg.sysplus.com/NDSEG/Applicants/Application-Evaluation-Award> and FAQ <https://ndseg.sysplus.com/NDSEG/FAQ/Application>.

Managed by:



[Contact Us](#) | [FAQs](#) | [About](#)
Department of Defense National Defense Science and Engineering Graduate Fellowship Program
Contact: DoD NDSEG Program Office | (301) 948-4232 | NDSEG.PMO@sysplus.com
One Research Court, Suite 360, Rockville, MD 20850

This section is optional. Should you choose to complete any one section of the form, you will be required to fill in the other sections. If the other sections do NOT apply to you, write "N/A" in the box.

For any item marked as REDACTION Required: **DO NOT** include any identifying information, such as your or any person(s) names, organization/institution names, or specific details that could tie the application back to you and any institution/organization or person.

RELEVANT EXPERIENCE

You may add up to 3 jobs/internships that are relevant to your past or current degree. Note: If this does not apply to you, write "N/A" in the box.

Job Internship 1	<input type="radio"/> Yes <input checked="" type="radio"/> No
Company Name	<input type="text"/>
Role/Position	<input type="text"/>
REDACTION REQUIRED: Description Responsibilities	<input type="text"/>
Start Date (Format = MM/YYYY)	<input type="text"/>
End Date (Format = MM/YYYY)	<input type="text"/>
Current Workplace	<input type="radio"/> Yes <input type="radio"/> No
Job Internship 2	<input type="radio"/> Yes <input checked="" type="radio"/> No
Company Name	<input type="text"/>

PUBLICATIONS

You may add up to 3 publications that are relevant to your past or current degree. Note: If this section does not apply to you, write "N/A" in the box.

Publication 1	<input type="radio"/> Yes <input checked="" type="radio"/> No
Title	<input type="text"/>
REDACTION REQUIRED: Description	<input type="text"/>
Date (Format = MM/YYYY)	<input type="text"/>
REDACTION REQUIRED: Comments	<input type="text"/>
Publication 2	<input type="radio"/> Yes <input checked="" type="radio"/> No
Title	<input type="text"/>
REDACTION REQUIRED: Description	<input type="text"/>
Date (Format = MM/YYYY)	<input type="text"/>
REDACTION REQUIRED: Comments	<input type="text"/>
Publication 3	<input type="radio"/> Yes <input checked="" type="radio"/> No



PATENTS

You may add up to 3 patents that are relevant to your past or current degree. Note: If this section does not apply to you, write "N/A" in the box.




Patent 1	<input type="radio"/> Yes <input checked="" type="radio"/> No
Title	<input type="text"/>
REDACTION REQUIRED: Description	<input type="text"/>
Date (Format = MM/YYYY)	<input type="text"/>
REDACTION REQUIRED: Comments	<input type="text"/>
Patent 2	<input type="radio"/> Yes <input checked="" type="radio"/> No
Title	<input type="text"/>
REDACTION REQUIRED: Description	<input type="text"/>
Date (Format = MM/YYYY)	<input type="text"/>
REDACTION REQUIRED:	<input type="text"/>

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AWARDS


You may add up to 3 awards that are relevant to your past or current degree. Note: If this section does not apply to you, write "N/A" in the box.

Award 1	<input type="radio"/> Yes <input checked="" type="radio"/> No
Awarded By	<input type="text"/>
Award Title	<input type="text"/>
REDACTION REQUIRED: Description	<input type="text"/>
Date (Format = MM/YYYY)	<input type="text"/>
REDACTION REQUIRED: Comments	<input type="text"/>
Award 2	<input type="radio"/> Yes <input checked="" type="radio"/> No
Awarded By	<input type="text"/>
Award Title	<input type="text"/>
REDACTION REQUIRED: Description	<input type="text"/>
Date (Format = MM/YYYY)	<input type="text"/>
REDACTION REQUIRED:	<input type="text"/>

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Fellowship Application (Status: Under Evaluation)

[Applicant Info](#) [Other Info](#) [Resume/CV](#) [Essay](#) [Proposal](#) [Transcripts](#) [Demographic](#) [References](#) [Statement](#) [Disclosure](#)

Application Period - (8/1/2024 - 11/1/2024) 2025 DoD NDSEG Fellowship Program 

Discipline: **Astrodynamics** [Submit Application](#)

Last Update: 8/1/2024

Resume/CV Upload (Saved/Complete)

Resume/CV [Unredacted Original Version]

Upload a recent PDF copy of your resume/CV using the following file name format: Lastname_Firstname_Resume

No file chosen



Uploaded Resume:
NDSEG Application (3).pdf

Redacted Resume/CV

Upload a recent PDF copy of your Redacted Resume/CV using the following file name format: Redacted_Resume.
[Here is the template](#)

No file chosen

Uploaded Resume:
NDSEG Application (3).pdf

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Last Update: 8/1/2024

Personal Essay (Saved/Complete)

REDACTION IS REQUIRED: DO NOT include any identifying information, such as your or any person(s) names, organization/institution names, or specific details that could tie the application back to you and any institution/organization or person.

No more than 500 words and no special formatting required for each essay.
Answer the following: What are your short and long-term professional goals? How did these goals develop? How have you already begun to lay the foundation for these goals? How does this fellowship fit into these goals?
Use the space provided to complete your personal essay.
Tip: Prepare your essay first in another application and copy and paste your final edited version in the box below.

•

Personal story statement to describe the Fellows personal journey to get where they are today (e.g., 1st to receive PHD, 1st to go to college, worked multiple position while achieving degree, what it took personally to get to where they are, etc...)

•

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RESEARCH PROPOSAL AGREEMENT

This proposal will be reviewed by Subject Matter Experts in your discipline including those from Academia, Industry and Government, including the Department of Defense. The submission of this research proposal allows the sharing and discussion amongst DoD agencies to evaluate relevancy to the NDSEG Fellowship Program. Should you be unwilling to submit a proposal that will be shared, you will be ineligible for the program.

Please click Yes to acknowledge that you have read this disclosure.

 Yes No

Use the link below to learn more about current interests of each branch. The below listed DoD Strategy Documents (e.g., BAA/FOA) links are for informational purposes only. Please do not contact the POCs listed in the DoD Strategy Documents (e.g., BAA/FOA) documents. The Agency program managers and researchers listed on the DoD Strategy Documents (e.g., BAA/FOA) topic will not review applicants packets and/or white papers. For any questions related to your DoD NDSEG application, please contact Systems Plus, Inc. at NDSEG.PMO@sysplus.com.

DoD Supporting Agencies

Based on the information from the links above, select the branch to which your proposal applies. (You may only select one)

Applicant DoD Agency Preference

Applies to Multiple Agencies - Priority 1. ONR 2. AFRL

Selections will not be based on your preference, but the needs of the DoD agency

PROPOSAL INFORMATION

Complete this form using the DoD Strategy Documents (e.g., BAA/FOA) information gathered for your research proposal.

List the DoD Strategy Document title that relates to your research proposal.

DM

List the title of your project (This can be unique to you - it does not need to be a title from the BAAs provided.)

DM

Research Proposal Abstract (Please enter in a Publicly Releasable Abstract of your Research Proposal being submitted with your application)

→ applyndseg.sysplus.com/Applicant/Application?Page_ID=0&APPLICATION_ID=13163

Research Proposal Abstract (Please enter in a Publicly Releasable Abstract of your Research Proposal being submitted with your application)

ccpicH4c

Research Advisor Information

First Name

DM

Last Name

DM

Institution

DM

Department

DM

Email

agnes@uw.edu

Phone Number

222-111-2333

RESEARCH PROPOSAL UPLOAD**Research Proposal [Unredacted Original Version]:**

Please upload your research proposal in PDF Format using the following file name format: Lastname_Firstname_ResearchProposal

 No file chosen

FY2025 NDSEG Fellowship Program Flyer_NEW LOGO_FOR REVIEW1 (1) (7).pdf


Uploaded redacted research proposal:

Please upload a redacted research proposal that **does not** include University Name, Organization/Laboratory Name, Fellow or Other Names, No Logos or Photos of individuals or Fellow Upload your research proposal in PDF Format using the following file name format: Redacted_ResearchProposal

 No file chosen

FY2025 NDSEG Fellowship Program Flyer_NEW LOGO_FOR REVIEW1 (1) (6).pdf

If for any reason an application does not contain all of the required elements, it will NOT be reviewed. It is the applicant's responsibility to ensure the completeness of their application. For more information, please Reference DoD NDSEG Website Application <https://ndseg.sysplus.com/NDSEG/Applicants/Application-Evaluation-Award> and FAQ <https://ndseg.sysplus.com/NDSEG/FAQ/Application>.

→  applyndseg.sysplus.com/Applicant/Application?Page_ID=0&APPLICATION_ID=13163 ☆

Upload a copy of your transcripts using the following file name format: Lastname_Firstname_UndergraduateTranscripts

 No file chosen

Uploaded Transcript:
NDSEG Application (2).pdf

ASSOCIATES DEGREE TRANSCRIPTS

Associate's Degree Transcripts

Yes No

MASTERS DEGREE TRANSCRIPTS

Masters Degree Transcripts

Yes No

DOCTORAL DEGREE TRANSCRIPTS

Doctoral Degree Transcripts

Yes No

Demographic Information (Saved/Complete)

Demographic Information

Gender

Ethnicity

Race

Disability Type

The categories for race are designed to identify your basic racial and national origin Category. If you are of mixed racial and/or national origin, identify yourself by the Category with which you most closely identify yourself.

Save

If for any reason an application does not contain all of the required elements, it will NOT be reviewed. It is the applicant's responsibility to ensure the completeness of their application. For more information, please Reference DoD NDSEG Website Application <https://ndseg.sysplus.com/NDSEG/Applicants/Application-Evaluation-Award> and FAQ <https://ndseg.sysplus.com/NDSEG/FAQ/Application>.

→ ☆

Reference submissions Do Not require redaction.

Please note, once you submit your application you will not be able to update your references or application. Please fill the reference information and send a notification email to each reference by clicking the "Email Reference" button on the form.

Reach out to your recommenders and update/replace reference information as needed to ensure you can include a reference with your application package.

Reference 1
Reference 2
Reference 3

Reference 1 Status: Email Sent

Reference Sent: 08/01/2024

Organization/Institution Name

Reference Type

Describe the Reference Type if "Other" is selected

First Name

Last Name

Email

Save

Click Save prior to Emailing Reference

**National Defense Science and Engineering
Graduate Fellowship Program****Fellowship Classes**FY2019 FY2023
FY2020 FY2024

Applicant | Agnes Test

Home- Applicant- Sign Out

Applicant Dashboard (Status: Under Evaluation)

2025 DoD NDSEG Fellowship Program ▾

- Applicant Information & Academic Record [Saved/Complete]
 - Other Information [Saved/Complete]
 - Resume or CV [Saved/Complete]
 - Personal Essay Form [Saved/Complete]
 - Research Proposal [Saved/Complete]
 - Official Transcripts [Saved/Complete]
 - Demographic Information [Saved/Complete]
 - References [Saved]
- Once you have completed the above application sections, please complete the following required certifications
- Applicant Statement [Saved/Complete]
 - Disclosure & Release Statement [Saved/Complete]

Your application cannot be revised after submission. You are responsible for ensuring your application is complete prior to submission.

APPLICANT TIPS

- The submission deadline is on **1 Nov 2024 at 11:59 PM, Eastern**. Ensure all application materials are completed before the deadline.
- We highly recommend you use a personal email address for your online application account.
- All of your responses can be changed prior to your submission. Once you submit you will not be able to make changes to your application—it is considered final.
- All application sections must be completed before an applicant can submit the application.
- References may include Academic Advisor, Research Advisor, and Internship Supervisor. Start reaching out to your references to notify them of your intent to include them as an application reference and also continuously remind them of the deadline. Log into the system periodically to ensure references have been submitted
- Reference are not required to submit your application and will NOT prevent your application from moving forward in the evaluation process, but are highly recommended.
- Applications that have not been submitted are considered incomplete and will not be reviewed. No application items will be accepted after the deadline
- Have your Advisor review your Personnel Essay and Research Proposal prior to submission
- Be sure to visit the DoD Strategy Documents links on the website under the Proposal Tab, as your research proposal needs to be a relevant research and development area aligned with the DoD Strategy Document.
- All Files must be uploaded as **PDFs ONLY**



DoD NDSEG Fellowship Program
Managed by:
Systems Plus, Inc.



Authorization Agreement

I hereby authorize **Systems Plus, Inc** contract manager for the **National Defense Science and Engineering Graduate Fellowship Program** to initiate automatic deposits to my account at the financial institution named below. I also authorize Systems Plus to make withdrawals from this account in the event that a credit entry is made in error

Further, I agree not to hold Systems Plus, Inc responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until Systems Plus receives written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to Systems Plus.

Account Information

Account Holder's Name: _____

Co-Account Holder's Name: _____

Name of Financial Institution: _____

Routing Number: _____

Account Number: _____ Checking | Savings

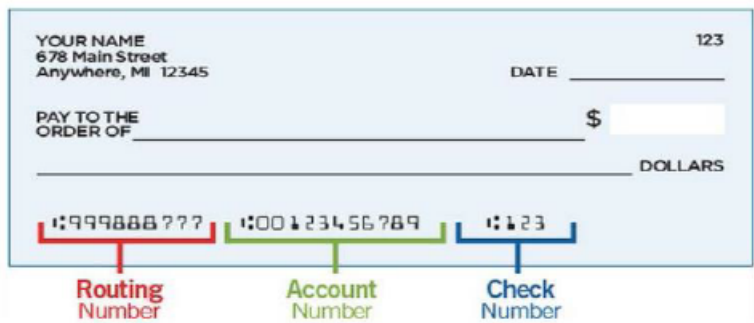
Is this a Joint Account? Yes | No

Signature

Authorized Signature (Primary): _____ Date: _____

Authorized Signature (Joint): _____ Date: _____

Please Attach a voided check or deposit slip and return this form to Systems Plus, address listed in the footer (Optional).





CDRL A0009 OMB Application Collection Instrument Approval

Signature:		Date:	
Print Name:	Agnes Socrates	11/20/2024	
Title:	Contractor Program Manager		
Role:	Contractor Program Manager		

Signature:		Date:	
Print Name:	Ellen M. Robinson		
Title:	Program Coordinator, NDSEG		
Role:	Contracting Officer's Representative		

Signature:		Date:	
Print Name:			
Title:			
Role:			