

Nanoscience at UNM New User Information Form

First Name:		Middle Initial:	Last Name:	
Mailing Address: (where you receive business related mail)			City:	State:
Mailing Address: (where you want invoices sent)			City:	State:
Attn:			Zip Code:	Zip Code:
Phone #:	Mobile or Alternate Phone #:	FAX #:	Email Address:	
Emergency Contact Name and Phone: (Required if planning to use the lab.)				
Project Principal Investigator (PI)* or Responsible Manager:			Email address for PI or Responsible Manager:	
Institution or Company Name:			Department:	
New Project Title: (please be short but descriptive)				
How would you categorize your project? (Check only one, please):				
<input type="checkbox"/> Education	<input type="checkbox"/> Chemistry	<input type="checkbox"/> Materials		
<input type="checkbox"/> Electronics	<input type="checkbox"/> Life Sciences	<input type="checkbox"/> Geological & Earth Sciences		
<input type="checkbox"/> MEMS/Mech Eng	<input type="checkbox"/> Optics	<input type="checkbox"/> Process / Characterization		
<input type="checkbox"/> Medicine	<input type="checkbox"/> Physics	<input type="checkbox"/>		

* If there is a Secondary PI, please provide the corresponding information for the secondary PI (name, affiliation, complete address, phone, fax and email) on a separate sheet.

Demographic Data Collection:

This information is being requested because, ...

The Federal Government has a continuing commitment to monitor its programs, to identify and address any inequities based on gender, race, ethnicity, or disability. Because Nanoscience @ UNM is supported by numerous Federal Agencies, they ask that we collect information related to gender, race, ethnicity or disability.

The submission of this information is not a precondition for the acceptance of this proposal. UNM treats this information as confidential and will only show it to the Directors of Nanoscience @ UNM and to appropriate members of the federal granting agencies upon their request.

1. Gender: Male Female
2. Status: U.S. Citizen Permanent Resident Other non-U.S. Citizen
3. Which of these categories best describes your ethnic / racial status?

American Indian or Alaskan Native <input type="checkbox"/>	Asian <input type="checkbox"/>	Black, not of Hispanic Origin <input type="checkbox"/>
Hispanic <input type="checkbox"/>	Pacific Islander <input type="checkbox"/>	White, not of Hispanic Origin <input type="checkbox"/>
4. Do you have a disability*, which limits a major life activity? Yes No

AMERICAN INDIAN OR ALASKAN NATIVE: A person having origins in any of the original peoples of North America and who maintains cultural identification through tribal affiliation or community recognition.

ASIAN: A person having origins in any of the original peoples of East Asia, Southeast Asia, or the Indian subcontinent. This area includes for example: China, India, Indonesia, Japan, Korea and Vietnam.

BLACK, NOT OF HISPANIC ORIGIN: A person having origins in any of the black racial groups of Africa.

HISPANIC: A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin regardless of race.

PACIFIC ISLANDER: A person having origins in any of the original peoples of Hawaii; the U.S. Pacific territories of Guam, American Samoa, and the Northern Marianas; the U.S. Trust of Palau; the islands of Micronesia and Melanesia; or the Philippines.

WHITE, NOT OF HISPANIC ORIGIN: A person having origins in any of the original people of Europe, North Africa or the Middle East.

***Disabled:** A person having a physical or mental impairment that substantially limits one or more major life activities; who has a record of such impairment or who is regarded as having such impairment.