

“Protecting Information in the Computer & Beyond”

WORKSHOP APPLICATION

Return by December 31, 2004

Instructions: Read the workshop description thoroughly before completing the application. The information you provide will be used to select applicants for participation based upon your background plans for implementation and institutional support. For additional information, call Lori Floyd (765) 496-6764.

Demographic Information	Name _____ Home Address _____ City, State and Zip _____ Phone _____ email _____ Institution _____ Position _____ Department _____ Work Address _____ City, State and Zip _____ Phone _____ email _____ Preferred summer mailing address _____ <div style="display: flex; justify-content: space-around; width: 100%;"> Home Work </div>												
Education	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 45%;">Degree Awarded</th> <th style="width: 35%;">Institution</th> <th style="width: 20%;">Year</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>	Degree Awarded	Institution	Year	_____	_____	_____	_____	_____	_____	_____	_____	_____
Degree Awarded	Institution	Year											
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Teaching Experience	Subject	Years
	_____	_____
	_____	_____
	_____	_____
	_____	_____

Implementation Plan	<p>Below is the workshop content. Please check the (a) content areas you are currently teaching, (b) the content areas that you are interested in adding to your curriculum and (c) Course numbers and titles of where the content will be added (if new course, write NEW) and projected student enrollment per course per academic year.</p>				
	Content	Currently Teaching	Planning to Add to Curriculum	Course Number & Title	Projected Student Enrollment
	Security and control, power relationships, and security as metacommunication				
	Language and lying, abuse of language, and language as a coding/decoding system				
	The impact of technology on social relations and personal identity, and technology and risk/risk assessment				
<p><i>Please submit a letter of support from your curriculum committee chair/program coordinator indicating institutional support for integration of this content into your curriculum.</i></p>					
Administrative	<p>Project evaluation will occur before, during and up to one year after the workshop and may include surveys, interviews and/or observations. No further travel is required. Do you agree to participate in all evaluation activities?</p> <p style="text-align: center;"> <input type="checkbox"/> YES <input type="checkbox"/> NO </p>				

I verify that I have read the information provided and I understand that my participation and stipend reimbursement is based upon successful implementation of workshop content into my curriculum as previously stated.

Name

Date

Please mail to:

Lori Floyd
CERIAS
Purdue University
656 Oval Drive
West Lafayette, IN 47907 – 2086
(765) 496-6764