2016 New York City Science and Engineering Fair
TEAM INFORMATION – PRINT clearly. Use BLUE or BLACK ink.

Student # 2 (Team Member) Information:
OSIS (required for NYC public HS students only): ___________________________

First Name: ___________________ M.I. _____ Last Name: ______________________

Address: ___________________________ Apt#: __________

City: __________________ State: _____ Zip: ________ Home Phone: (_____ ) __________

E-mail: ___________________________ Cell Phone: (_____ ) __________

Date of Birth (mm/dd/yy): _____/_____/____ Sex: _M  _F  Current Grade: ___9th ___10th ___11th ___12th

Race/Ethnicity: (for statistical purposes only - optional)
Are you Hispanic/Latino? ____Yes  ____No

Select one or more races:
___Black or African American  ___Asian  ___White
___ Native Hawaiian or Pacific Islander  ___ American Indian or Alaska Native

School Information (only if different from Team Leader)

School Name: ___________________________ ETS Code: ___________________________

School Address: __________________________________________  City: ___________  Zip: _________

Student # 3 (Team Member) Information:
OSIS (required for NYC public HS students only): ___________________________

First Name: ___________________ M.I. _____ Last Name: ______________________

Address: ___________________________ Apt#: __________

City: __________________ State: _____ Zip: ________ Home Phone: (_____ ) __________

E-mail: ___________________________ Cell Phone: (_____ ) __________

Date of Birth (mm/dd/yy): _____/_____/____ Sex: _M  _F  Current Grade: ___9th ___10th ___11th ___12th

Race/Ethnicity: (for statistical purposes only - optional)
Are you Hispanic/Latino? ____Yes  ____No

Select one or more races:
___Black or African American  ___Asian  ___White
___ Native Hawaiian or Pacific Islander  ___ American Indian or Alaska Native

School Information (only if different from Team Leader)

School Name: ___________________________ ETS Code: ___________________________

School Address: __________________________________________  City: ___________  Zip: _________