



Amateur Radio on the International Space Station (ARISS) Contact Proposal

The ARISS-US program opens proposal windows for applicants from the United States twice each year in order to accept proposals for contacts to be scheduled 6-12 months in the future. You'll find information about the current or next proposal window at <http://www.ariss.org/submit-a-contact-proposal.html>. Proposal Webinars will be offered prior to the submission deadline in order for you to ask questions about the program. Please check <http://www.ariss.org/> for updated dates and times.

Privacy Policy:

The information you provide will be used by ARISS member organizations only for its intended purpose. Submitting information is strictly voluntary. By doing so, you are giving ARISS your permission to use the information for the intended purpose. If you do not want to give ARISS permission to use your information, simply do not provide it. However, not providing certain information may result in ARISS's inability to provide you with the information or services you desire.

Discrimination Policy:

The ARISS program does not discriminate on the basis of race, color, national origin, sex, disability, or age.

Directions:

Please read the ARISS Proposal Guide and then fill out this proposal form to the best of your ability. You'll find the proposal guide at: http://www.ariss.org/uploads/1/1/1/6/111680627/2018-03-13-ariss_proposal_guide.pdf

Save your completed proposal form as a Microsoft Word document **using this file naming convention**: "Organization_Name_YYYY-MM-DD_ARISS Proposal.docx" and email it to ariss.us.education@gmail.com along with your Letters of Commitment (see Section 5). If you have any questions or comments, please email.

**This proposal is being submitted for the Contact Window of
January 1, 2020 – June 30, 2020**

**This proposal is due to ARISS by May 15, 2019
at 11:59 PM Pacific Time.**

Section 1: Contact Information

<p>Lead Host Organization</p>	<p>Organization Name: Address: City, State, Zip Code: Web site: Telephone:</p>
<p>Lead Host Organization Chief Administrator (principal, director, president, etc.)</p> <p><i>Will receive copies of certain key ARISS correspondence</i></p>	<p>Name: Title/Role: Address: City, State, Zip Code: Work Telephone: Email:</p>
<p>Lead Host Organization Main Point of Contact (usually the person completing this proposal)</p> <p><i>Must be authorized to represent the Lead Host Organization, obtaining ARISS Talent Releases, and will be responsible for submitting an ARISS Activity Report after the contact which requires information about the student and audience participation in the radio contact event and related educational activities</i></p>	<p>Name: Title/Role: Address: City, State, Zip Code: Work Telephone: Mobile: Email:</p>
<p>Technical Point of Contact</p> <p><i>Will coordinate audio/video/Internet technology for the event</i></p>	<p>Name: Title/Role: Address: City, State, Zip Code: Work Telephone: Mobile: Email:</p>
<p>Media Coordinator</p> <p><i>Will coordinate publicity, outreach to local media—not just postings on school or group web sites and social media-- and be responsible for obtaining high-resolution photos and any other media documentation of the educational activities and ISS interview to provide to the ARISS program</i></p>	<p>Name: Title/Role: Address: City, State, Zip Code: Work Telephone: Mobile: Email:</p>

<p>Partner Organization Main Point of Contact <i>(if applicable)</i></p> <p><i>Main contact from another school or educational organization in partnership to host the ARISS contact. Example: a science museum partnering with a local school that will provide the students who will be participating.</i></p>	<p>Organization Name: Contact Name: Title/Role: Address: City, State, Zip Code: Daytime Telephone: Mobile: Email:</p>
<p>Local Amateur Radio Club Main Point of Contact</p> <p><i>If identified at time of proposal; this person will coordinate support being provided by local amateur radio community</i></p>	<p>Name and Call Sign: Address: City, State, Zip Code: Daytime Telephone: Mobile: Email:</p>
<p>Additional Point of Contact <i>(optional)</i></p> <p><i>Anyone else from the educational community or ham radio community who will be involved in leading the execution of this proposed plan</i></p>	<p>Name: Address: City, State, Zip Code: Daytime Telephone: Mobile: Email:</p>
<p>Have you attended the ARRL Teacher Institute (TI)? Would you like more information?</p>	<p><input type="checkbox"/> Yes: Date _____ <input type="checkbox"/> No <input type="checkbox"/> Please send more information about ARRL TI to this email address: _____</p>
<p>How did you hear about the ARISS program?</p>	
<p>Has your organization or local area hosted a prior ARISS contact? If so, when?</p> <p><i>Preference will be given to organizations that have not had a contact in the past three years</i></p>	

Section 2: Scheduling Considerations for ARISS Contact

1. If your organization is selected for an ARISS contact, are there any dates during the proposed cycle that your organization cannot support? **Type the weeks, days of week, times of day that you cannot support below.** List all vacation days, school holidays, testing days, etc. Additionally, providing a school or facility calendar may be helpful. *Please note that the more flexible your organization, the more likely we will be able to schedule a contact.*
2. Please provide any preferred time for the event to be held. If you are planning around a specific event occurring on a specific day(s) or week(s), state that clearly.
3. Please provide your time zone.
4. At this point do you have a preference for a Direct or a Telebridge configuration for your contact?
For example, there may be known constraints at your location or constraints related to a specific event on a particular day and time that would make a Direct Contact difficult to schedule and would indicate a Telebridge Contact would be your best choice. If you have already determined your preference, please indicate that here. If you don't have a preference, please indicate "either." If you don't yet know how to assess your preference without further guidance, please indicate "unsure" (delete those choices below that do not apply). **Note:** *Due to the nature of the program, we cannot guarantee a particular request.*

Prefer Direct Contact
Prefer Telebridge Contact
Either
Unsure

Section 3: Education Plan

For the following items, please include as much detail and information as you feel is appropriate within the prescribed word limits. We will not review information that exceeds the prescribed response limit. NOTE: Microsoft Word allows you to select a section of text and perform a Word Count using the Tools menu (versions differ between Mac OS and Windows environments).

1a. Our school/organization is (delete those choices below that do not apply):

Urban
Rural
Suburban

Public school
Charter school
Private school
Parochial school
Museum
Other organization type (please explain)

1 b. Describe the student population (demographics) that will be engaged in your education plan and the audience that will be present for the ARISS radio contact event. If students from another school/organization are to be involved in your education plan and/or in the audience for the radio contact, include demographics of that student population, as well. Include these demographic descriptors: age level, education level, ethnicity and native languages, % receiving reduced price lunch, % of socio-economically disadvantaged. If you have previously hosted an ARISS contact, describe how you will reach a different audience with this new proposal. *Limit 250 words.*

1 c. Describe your school/organization's purpose and its educational objectives/mission statement. *Limit 250 words.*

2. Explain why your organization wants to host an ARISS radio contact and how an ARISS radio contact will enhance the educational objectives of your organization. Specifically, describe how your organization will use the ARISS radio contact to support local STEM (Science, Technology, Engineering, and Math) goals and objectives. *Limit of 350 words.*

3. Describe any community partnerships that will be part of the ARISS radio contact and surrounding activities. Specifically, list any local amateur radio organizations that will be supporting your contact and/or that will be involved in your educational plan, as well as any other educational organizations or other community resources that will be involved in carrying out your educational plan. Describe how these organizations have committed to be part of or will support your educational plan. **Note:** Be sure to name the point of contact for these organizations in Section 1 and obtain Letters of Commitment from the named organizations to accompany your proposal as requested in Section 5. *Limit of 350 words.*

4 a. Describe your year-long STEM curricular topics and some of the hands-on preparatory learning activities to be engaged with students at different grade levels leading up to and after the radio contact with the ISS. Review the resources listed in the Addendum to the Proposal Guide and describe how you plan to incorporate NASA and amateur radio content and some of these or other education resources into your education plan. *Limit of 1200 words*

4. b. Describe activities planned for the weeks and days leading up to and after the ARISS radio contact. *Limit 500 words.*

4 c. Describe how the radio contact interview questions will be developed and how you will select the students who will ask the questions of the ISS crewmember. *Limit of 350 words.*

5. Describe how you will organize your proposed ARISS radio contact, including the location, transportation details (if needed), and how you will have the supporting technology (audio/video/Internet) in place. *Note:* You will provide details about the radio station equipment supporting your contact in your Equipment Plan. That information is not needed here. *Limit of 350 words.*

6. Provide information on your organization's plan to secure your target audience in case there is a shift in dates and/or times (i.e. a "Plan B"). Consider this scenario: *Four days before the date that has been scheduled for your contact, an ISS event occurs that means the contact will not be possible at the time previously scheduled. You are offered an alternate contact time a week later. How will you adjust and work to get all students, parents, media on site?* *Limit of 250 words.*

7. Describe your organization's plans to evaluate the educational and STEM impact of the ARISS radio contact on students. How will you determine if the event has influenced the students' learning, and/or their new attitudes toward future studies and learning and amateur radio, and/or students' new thoughts about STEM careers? *Limit of 350 words.*

Section 4: Media Plan

Describe your media/promotion plan to engage your community through contacting the news media. (Please refer to the suggestions in the Proposal Guide.) Be specific. *Limit of 350 words.*

Section 5: Letters of Commitment

Provide signed Letters of Commitment from **each participating organization named in your education plan;** include **signatures of lead administrators of all organizations including your own.** (see Section 1). All letters are to be addressed to ARISS-US Education Committee, scanned and submitted electronically together with this proposal via email to ariss.us.education@gmail.com.

Section 6: Sample Timeline Day of ARISS Radio Contact

Create a sample internal-use schedule that outlines the day of the ARISS radio contact for your staff members. This sample schedule would be used for your internal coordination and planning (transportation of students, audio/video/Internet setup, contacting local media, coordination with amateur radio team, activities, etc.) and is not intended to be the program distributed to the ARISS radio contact audience. For this sample document, assume your ARISS radio contact is scheduled from 11:15 am – 11:25 am. (Note: Your sample schedule is intended to show that you have thought through the contact process. It is not a commitment.) *Limit of 550 words.*