**Amateur Radio on the International Space Station (ARISS)**

**School Application Form**

**For an Organized Radio Contact with the International Space Station**

***Please read instructions before filling out the application.***

**SECTION A**

**ALL QUESTIONS IN THIS SECTION MUST BE ANSWERED.**

**For a direct contact, fill out questions A1 to A15 and B1 to B7. For a telebridge contact, fill out questions A1 to A15.**

Note: Please enter your country code and city code as part of the telephone number for any voice, fax, or cellular phone.

(A1.) Date of application: (A2.) School

Name: Address: City:

State, province, territory, mail district: Zip or postal code:

Country: Phone #: Fax #:

E-mail address:

School Web site address: Normal school hours:

Brief description of the school and the amateur radio school club (if there is one):

(A3.) Principal

Name:

School phone #: School fax #:

School e-mail address: Pager #:

Home phone # Home fax #: Cellular phone #:

Home e-mail address: Home address:

Home city:

Home state, province, territory, mail district: Home zip or postal code:

Home country:

(A4.) Coordinating teacher

Name:

Grade level/subject taught: School phone #:

School fax #:

School e-mail address: Pager #:

Home phone #: Home fax #: Cellular phone #:

Home e-mail address: Home address:

Home city:

Home state, province, territory, mail district: Home zip or postal code:

Home country:

(A5.) Public relations contact

Name:

Work phone #: Work fax #:

Work e-mail address: Pager #:

Home phone #: Home fax #: Cellular phone #:

Home e-mail address: Home address:

Home city:

Home state, province, territory, mail district: Home zip or postal code:

Home country:

(A6.) Has the school previously been selected for a shuttle, Mir, or ISS contact? (YES or NO):

If YES, which mission?

STS: or Astronaut on Mir or ISS: Date of contact:

Did the school have a complete contact? If no, please explain why not.

(A7.) Language requested: English is the language that is normally used on the ISS. It is possible that other languages may be used. If another language is requested, please indicate the desired language.

(A8.) Are weekends, holidays or nights a problem for your contact? (YES/NO)

Please forward the school calendar for the year. To aid the contact planners, provide dates

for major holidays, or other known problem dates. Be as descriptive as possible. (i.e. school starts the third week of August, holiday is the fourth Thursday of the month, etc.)

(A9.) Attach the school's educational proposal to this application before submitting.

The educational proposal should include answers to these questions: How will you:

a) integrate this activity into the school curriculum?

b) involve as many grade levels as you can, with participation through essay

contests, planning a Mars outpost, learning to track the ISS, learning about basic circuit boards, poster drawing, letter writing, etc.?

c) obtain as much media coverage as possible? (A10.) Contact site phone #:

(A11.) Contact site cellular phone #: (A12.) Contact site fax #:

(A13.). Contact site time zone:

When does your area go to Daylight Saving Time?

(A14.) Hours before or after UTC (Coordinated Universal Time): (A15.) Assisting local amateur radio club

(To be filled out by the amateur radio club if one is providing assistance) Name of amateur radio club:

Club contact person: Contact person's call sign: Contact person's home phone #: Contact person's work phone #: Contact person's pager #: Contact person's e-mail address:

Is the club experienced with satellite operations? (YES or NO):

National amateur radio organization (if club is affiliated with a national amateur radio organization such as the ARRL):

**AUTHORIZATION AND USE OF PERSONAL INFORMATION**

**In compliance with privacy laws on the detention and the processing of personal information, the applicants are invited to complete and sign the present authorization statement and e-mail it, duly scanned, to the ARISS School Selection Manager.**

S chool’s Name and Ci t y :

Principal

The undersigned, duly authorized to represent the school (or youth organization), gives permission to the ARISS organization for the processing and use of data related to and needed for the setting up of an educative ARISS radio contact, provided care be taken that the data will not be made available to other parties, accordingly to the applicable law.

Moreover, the undersigned gives permission to the ARISS organization for publishing the school’s ARISS related educational project on the ARISS website, provided no personal data be made available, except the school’s address, e-mail and phone number.

Date :

Name and Signature :

Participants

Accordingly to the applicable law, the undersigned give permission to the ARISS organization for the processing and use of their personal data related to and needed for the setting up of an educative ARISS radio contact, provided care be taken that the data will not be made available to other parties.

Coordinating Teacher

Date :

Name and Signature :

Public Relations Contact Person

Date :

Name and Signature :

Amateur Radio Operator

Date :

Name and Signature :

**SECTION B**

**ONLY ANSWER THESE QUESTIONS BELOW IF A DIRECT CONTACT BETWEEN THE SCHOOL AND ISS IS REQUESTED**

If you are unsure how to answer a question, please ask your ARISS representative for help. (B1.) Radio contact coordinator

(To be filled out by an amateur radio operator)

Name: Call sign: Home address: Home city:

Home state, province, territory, mail district: Home zip or postal code:

Home country: Home phone #:

Pager #:

Cellular phone #: Home fax #:

Home e-mail address: Work phone #:

Work fax #:

Work e-mail address:

Experienced with satellite operations? (YES or NO):

DATA ABOUT SITE OF RADIO CONTACT (B2). Site of radio contact location information:

Latitude [Use decimal format] (Indicate N=North S=South): Longitude [Use decimal format] (Indicate W=West E=East): Elevation [Use meters above mean sea level]

Note: For help in converting latitude and longitude to decimal format, see: Longitude and Latitude.doc

Address: City:

State, province, territory, mail district: Country:

(B3.) Radio coordinator during contact: Name:

Call sign: Home address: Home city:

Home state, province, territory, mail district: Home zip or postal code:

Home country: Home phone #: Pager #:

Cellular phone #: Home fax #:

Home e-mail address: Work phone #:

Work fax #:

Work e-mail address:

Experienced with satellite operations? (YES or NO): (B4.) Call sign at contact site:

(B5.) Station and equipment data

(To be used during the ARISS amateur radio contact)

We require 2 complete radio stations at your event site. See: ARISS Contact Requirements document.

Photos of the radio equipment to be used by the school may be required prior to final approval for the radio contact.

Radio Station #1

Transceiver to be used (manufacturer/model):

Does it have memories? (YES or NO): If yes, number of memories: If yes, is the memory considered tunable like a VFO?

Output Power (Watts): Frequency range (MHz): Frequency steps:

Station equipped with an RX preamplifier? (YES or NO): If YES, manufacturer and model of Preamplifier:

Station equipped with a TX amplifier? (YES or NO): If YES, manufacturer and model of amplifier:

If YES, maximum output power of TX amplifier (Watts): Is the radio capable of a non-standard split? (YES or NO):

Antenna type (VERTICAL, SATELLITE (AZ/EL?), OTHER) [specify]: If commercially built, manufacturer and model:

Antenna gain (dbd or dbi): Number of elements:

Polarization (HORIZONTAL, CIRCULAR, or VERTICAL)

Antenna equipped with a rotator? (NONE, AZIMUTH ONLY, or AZ/EL): Satellite tracking program available? (YES or NO):

If YES, name of tracking program:

Do you have Automatic Antenna Control? (YES or NO): VHF Packet capability? (YES or NO):

VHF SSTV capability? (YES or NO): Do you have phone patch capabilities?

SWR/Power output meter to be used (manufacturer/model): Coax cable to be used:

Radio Station #2

Transceiver to be used (make/model):

Does it have memories? (YES or NO): If yes, number of memories: If yes, is the memory considered tunable like a VFO

Output Power (Watts): Frequency range (MHz): Frequency steps:

Station equipped with an RX preamplifier? (YES or NO): If YES, manufacturer and model of preamplifier:

Station equipped with a TX amplifier? (YES or NO):

If YES, maximum output power of TX amplifier (Watts): Is the radio capable of a non-standard split? (YES or NO):

Antenna type (VERTICAL, SATELLITE (AZ/EL?), OTHER) [specify]: If commercially built, manufacturer and model:

Antenna gain (dbd or dbi): Number of elements:

Polarization (HORIZONTAL, CIRCULAR, or VERTICAL)

Antenna equipped with a rotator? (NONE, AZIMUTH ONLY, or AZ/EL): Satellite tracking program available? (YES or NO):

If YES, name of tracking program:

Do you have Automatic Antenna Control? (YES or NO): VHF Packet capability? (YES or NO):

VHF SSTV capability? (YES or NO): Do you have phone patch capabilities?

SWR/Power output meter to be used (manufacturer/model): Coax cable to be used:

(B6.). Please note any antenna obscuration data for the site of the radio contact: Azimuth degrees Elevation degrees

0 (North)

45

90 (East)

135

180 (South)

225

270 (West)

315

360 (North)

For example:

Azimuth degrees Elevation degrees

0 to 50 0

50 to 90 15

90 to 100 30

100 to 140 5

140 to 280 10

280 to 360 5

(B7.) Do you plan to do a live re-transmission or webcast? If a live re-transmission, how and on what frequency and mode? If a webcast, what is the Web site address?