



**Project  
ASTRO  
NEWMEXICO**

# *PROJECT ASTRO-NM*

## **ASTRONOMER APPLICATION**

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State.: \_\_\_\_\_ ZIP: \_\_\_\_\_

Email (Work): \_\_\_\_\_ Email (home) \_\_\_\_\_

Place of Employment: \_\_\_\_\_

1. Briefly describe your background and experiences in astronomy: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

2. Describe any experiences you have working with schools, students or the public:

\_\_\_\_\_  
\_\_\_\_\_

3. What grade level(s) do you prefer working with?

4    5    6    7    8    9

4. Please list the astronomy organizations you are affiliated with: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

5. Rate your knowledge of astronomy (1 = low, 5 = high)

1    2    3    4    5

1. Teams of two astronomers from the same group or institution are encouraged to apply. Please list the name of your partner (if applicable): \_\_\_\_\_

2. Why do you want to participate in Project ASTRO-NM?

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As an astronomer volunteer, I commit to attending a two-day workshop; work closely with my teacher partner to present quality astronomy activities in the classroom at least 4 times in a semester, and act a a resource for my partner teacher.

Your  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return to:**

**The New Mexico Museum of Space History  
Education Department  
P.O. Box 5430 Alamogordo, NM 88311**

**phone: (toll free) 877-333-6589 email: Leah.Tooney@state.nm.us**