

CES Registration Questions (Preview)

Student Information

First name
Last name
Z-ID
NIU student email
Preferred email
Phone number
Year in school
College
Major
Minor

Faculty/Staff/Supervisor Information

First name
Last name
Email
College (if applicable)
Academic department (if applicable)
I worked with more than one faculty/staff/supervisor. YES/NO

Additional Faculty/Staff/Supervisor Information (if applicable)

1st additional person's first name
1st additional person's last name
1st additional person's NIU email
2nd additional person's first name
2nd additional person's last name
2nd additional person's NIU email

Co-Presenter Information

My presentation has co-presenters. (Co-presenters will attend CES to present your team project.) YES/NO

If yes, you may list up to 7 co-presenters:

- 1) First name of 1st additional presenter
Last name of 1st additional presenter
zID of 1st additional presenter
NIU student email of 1st additional presenter
Preferred email of 1st additional presenter
Phone number of 1st additional presenter
- 2) First name of 2nd additional presenter
Last name of 2nd additional presenter
zID of 2nd additional presenter
NIU student email of 2nd additional presenter
Preferred email of 2nd additional presenter
Phone number of 2nd additional presenter
- 3) First name of 3rd additional presenter
Last name of 3rd additional presenter

CES Registration Questions (Preview)

- zID of 3rd additional presenter
- NIU student email of 3rd additional presenter
- Preferred email of 3rd additional presenter
- Phone number of 3rd additional presenter
- 4) First name of 4th additional presenter
- Last name of 4th additional presenter
- zID of 4th additional presenter
- NIU student email of 4th additional presenter
- Preferred email of 4th additional presenter
- Phone number of 4th additional presenter
- 5) First name of 5th additional presenter
- Last name of 5th additional presenter
- zID of 5th additional presenter
- NIU student email of 5th additional presenter
- Preferred email of 5th additional presenter
- Phone number of 5th additional presenter
- 6) First name of 6th additional presenter
- Last name of 6th additional presenter
- zID of 6th additional presenter
- NIU student email of 6th additional presenter
- Preferred email of 6th additional presenter
- Phone number of 6th additional presenter
- 7) First name of 7th additional presenter
- Last name of 7th additional presenter
- zID of 7th additional presenter
- NIU student email of 7th additional presenter
- Preferred email of 7th additional presenter
- Phone number of 7th additional presenter

Co-Author Information

My presentation has co-authors. (These individuals may or may not be presenting with you.)
YES/NO

If yes, you may list up to 7 co-authors.

- 1) First name of 1st additional author
- Last name of 1st additional author
- zID of 1st additional author
- 2) First name of 2nd additional author
- Last name of 2nd additional author
- zID of 2nd additional author
- 3) First name of 3rd additional author
- Last name of 3rd additional author
- zID of 3rd additional author
- 4) First name of 4th additional author
- Last name of 4th additional author
- zID of 4th additional author
- 5) First name of 5th additional author

CES Registration Questions (Preview)

- Last name of 5th additional author
zID of 5th additional author
- 6) First name of 6th additional author
Last name of 6th additional author
zID of 6th additional author
- 7) First name of 7th additional author
Last name of 7th additional author
zID of 7th additional author

Project Information

Title of presentation

Project Description (In 250 words or less, please describe your project. Please note that the information you provide will be listed in the program exactly as it is submitted.)

Which NIU program, campus unit, department, or student group are you representing?

Is this project tied to a service-learning course? YES/NO

Course Prefix (if applicable)

Course Number (if applicable)

Name of the campus or community organization that you collaborated with

Brief description of the campus or community organization (250 words or less)

Campus or Community Organization Information

Contact's First Name

Contact's Last Name

Contact's Title

Phone Number

Email

Street Address

City, State, Zip

Did you complete your project as a requirement of a specific program?

Huskie Service Scholars, NIU Service Leaders, or Other

Are you interested in a CES Orientation? (Yes or No)

If yes, you may list times that you are available during the week.

Monday (Morning, Afternoon, Evening)

Tuesday (Morning, Afternoon, Evening)

Wednesday (Morning, Afternoon, Evening)

Thursday (Morning, Afternoon, Evening)

Friday (Morning, Afternoon, Evening)

End of Registration