

Contact Information:

Last Name: _____

First/Middle Name: _____

Address: _____

City: _____

State: _____

Zip/Postal Code: _____

Country: _____

Email (Primary): _____

Email (Alternate): _____

Phone (Home): _____

Phone (Mobile): _____

Phone (Work): _____

Demographic Information:

In complying with the letter and spirit of applicable laws and in pursuing our own goals of pluralism, SANS Institute shall not discriminate on the grounds of race, color, religion, sex, sexual orientation, age, disability, or Veterans status.

Date of birth: (MM/DD/YYYY): _____

Gender:

Male

Female

Race/Ethnicity:

Asian or Pacific Islander

Hispanic

American Islander or Alaskan Native

White (Non-Hispanic)

Black or African-American

Other or Unknown

Your Experience:

Current Employer: _____

Position/Title: _____

Current rank: _____

Date of terminal leave: _____

Years experience in current position: _____

Years experience in information technology: _____

Years in information security: _____

Your Education & Certifications:

College/University: _____

Degree/Major: _____

Year of Graduation: _____

GPA: _____

Please indicate below whether you have previously taken SANS classes or GIAC certifications, including the status of the GIAC certification and whether it has been made Gold. There are no prerequisites for the SANS Institute related to SANS courses or GIAC certifications, but there are potentially waivers made for courses already taken, or certifications already achieved:

Certifications: PMP CISA CISSP

Other: _____

I, the undersigned, I do hereby approve and confirm:

1. All application materials I submit to the SANS Institute are true to the best of my knowledge and ability.
2. All application materials I submit to the SANS Institute become a part of the permanent records of the SANS Institute and will not be returned to me.
3. I understand and agree that the SANS Institute uses the services of its affiliate, GIAC, for the provision of services including, assessments, data processing, and record-keeping. I release the SANS Institute and GIAC, to share with each other (and only with each other) any and all information each may currently or may in the future hold about me in their systems. In so doing, I am authorizing the SANS Institute to release my training dates/locations and related information to potential employers, and I am authorizing GIAC to release my exam/paper scores and related information to potential employers. These data may be used by the SANS Institute during their review of my application, in the course of any future academic advising, progress tracking, or other educational purposes.
4. I expressly authorize the SANS Institute to use the systems provided by the SANS Institute or GIAC for purposes of providing their educational programs to me.

Signature: _____

Name (printed): _____

Date: _____