



**RONALD E. McNAIR POST BACCALAUREATE ACHIEVEMENT
PROGRAM APPLICATION**

Please return your typed application form along with required supporting materials to:

**McNair Program
2202 Marie Mount Hall
College Park, MD 20742**

A. PERSONAL INFORMATION

Date _____

Name _____
Last First Middle

Local Address _____
City State Zip Code

Local Phone Number _____ Cell Phone Number _____

Permanent Address _____
City State Zip Code

Telephone Number () _____ email address _____

Date of Birth _____ Gender: Female Male
Month Day Year

Place of Birth _____ SSN _____
City State / Zip Code

Are you a U.S. citizen? _____ If no, please complete the following:

Country of citizenship _____ Type of Visa _____

Alien Registration number _____ Date of Issue _____

Expiration Date _____ (Please provide a copy of your alien registration card)

Ethnic Heritage: African American Asian
 Hispanic Native American
 Caucasian Other _____

University of Maryland ID: _____

High school graduation date _____

Please list other academic institutions attended in the space below.

Institution	Attendance	Credits	GPA

What is your current major? _____

What is your projected graduation date? _____

Will you have completed your sophomore year by May of the current academic year? Yes No

YOU MUST SUBMIT AN OFFICIAL TRANSCRIPT WITH YOUR APPLICATION

Which academic degree do you intend to pursue after completing your Bachelor's Degree:

Ph.D. M.D./Ph.D. J.D. M.F.A. Other _____

Please list any research experiences you have had.

Research Area	Supervisor / mentor	Location	Date

Please describe any computing skills you may have.

How did you hear about the McNair Program?

Fellow Student Department Website Counselor/Advisor
 Other _____

B. FAMILY & VERIFICATION INFORMATION

The information below, which must be provided by all applicants, is used to determine applicant's eligibility for the McNair Program and will be treated **confidentially**.

Last year's Income Tax Return form must be returned along with the application.

I. Did your parents or guardian file taxes last year?

II. How many individuals were claimed as dependents on your parents'/guardians' federal income tax return form?

III. Place an **X** on the appropriate line below indicating your parents'/guardians' **taxable income** (line 37 on form 1040; line 22 on form 1040A and line 5 on form 1040EZ) for last year. If you are independent use your Tax Return forms and provide proof of independence (you can obtain this from your Student Financial Aid Office).

- 1. _____ 16,335 - 22,064
- 2. _____ 22,065 - 27,794
- 3. _____ 27,795 - 33,524
- 4. _____ 33,525 - 39,254
- 5. _____ 39,255 - 44,984
- 6. _____ 44,985 - 50,714
- 7. _____ 50,715 - 56,444
- 8. _____ 56,445 and higher

IV. Does your family receive assistance from any of the following:

AFDC (aid to families with dependent children)

Yes No

Social Security

Yes No

Veterans' Benefits

Yes No

Food Stamps

Yes No

Unemployment Compensation

Yes No

V. Did either of your parents (natural or adoptive) earn a bachelor's degree?

Yes No

VI. Did you live with your natural or adoptive parent (s) on your eighteenth birthday? Yes No

Signature of Parent/Guardian/Independent Student Date

Notary Signature Date

C. ACADEMIC BACKGROUND

Please have this page notarized before returning to McNair.

Current Institution _____

Current cumulative GPA _____

High School from which you graduated _____

City _____ State _____ Zip Code _____

High School GPA _____

D. ADDITIONAL REQUIREMENTS

I. RECOMMENDATIONS

Using the attached forms, provide three (3) letters of recommendation assessing your academic ability, research potential and your motivation and preparation to undertake graduate study. Two of the letters **must** be from faculty in your major. If you are a former participant in any of the **TRIO** programs (Educational Talent Search, Educational Opportunity Centers, Upward Bound, Upward Bound Math and Science, Veterans' Upward Bound and Student Support Services) one recommendation must come from the director/counselor of the program in which you participated. Below, list the names, addresses and telephone numbers of your recommenders.

1. Name _____

Address _____

Phone Number _____

2. Name _____

Address _____

Phone Number _____

3. Name _____

Address _____

Phone Number _____

II. STATEMENT OF PURPOSE

Please write an essay "Why I want to Participate in the McNair Program." Your essay should include both your educational and career goals, research interest, and how the McNair Program can assist you. Your essay should not exceed two pages.

To the best of my knowledge, the information given on this application is accurate, complete and true. Further, I understand that if selected, I am expected to participate in the McNair Summer Research Experience during the six weeks from June to mid-July.

Signature

Date

FOR OFFICE USE ONLY

Student Name _____

Review Date _____

Reviewer _____

QUALIFICATIONS

Low income?	First generation?	Under-represented?	Overall GPA?	Major GPA?
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SELECTION FACTORS AND SCORES

	1	2	3	4	5
Intellectual potential					
Research aptitude					
Graduate school potential					
Recommendation letters					
Writing ability					
Maturity					
Goal Clarity					
Commitment to Academe					
Communication skill					
Probability of Admission					
Potential to earn Ph.D					
Total Points:					

Comments: _____

ACTION

Date

Accept _____

Alternate _____

Deny (reason) _____

Student Response _____

Possible Mentor (s) _____

Reviewer Signature _____

