

## APPLICANT'S CHECKLIST

Application	□ (complete, sign and date)
Transcripts	☐ (submit an official transcript from your former school, if your CSU transcript doesn't show the current GPA and credits)
Resume	
Statement of purpose	□ (sign and date)
Recommendation 1	
Recommendation 2	
Do I qualify?	□ (sign and date)
Release of information	□ (sign and date)
GPA and attendance policy agreement	□ (sign and date)
Photography/video model release	□ (sign and date)
Tax return, SAR	$\hfill\Box$ (only for those who qualify as first generation low-income student)
Permanent residency document	□ (only for permanent resident of US)

letter should come from a faculty member who knows your academic and/or research work.

It is applicant's responsibility to make sure that the McNair office receives reference letters. At least one

Application will not be considered until the office of the McNair Scholars Program receives all the above documents.

Rev.: 11/15/2013



# **TRIO McNair Scholars Program**

## **STUDENT APPLICATION**

A.

В.

		Date
Personal information		
Full Legal Name:		CSU ID#
		_
Local address (number, street, apartm	ent, city, state, z	p code)
Telephone Number:		
Permanent address (number, street, a	partment, city, st	cate, zip code)
Telephone Number (at permanent add	lress):	
E-mail:		Cell Phone Number:
Gender: □ Female;	□ Male	
Birth Date://		Birth place:
What is your citizenship status?	□ US citizen;	☐ US Permanent resident
	*(if peri	nanent resident, please provide copy of INS documentation)
Academic information		
First enrollment date in a postseconda	ry education (ma	ay or may not be CSU):
College:	Major:	Minor:
Year: □ Sophomore □ Junior	□ Senior	Date degree expected://20
Will you, at least, have sophomore standing by May of the current academic year?		
		□ Yes □ No
Grade Point Average (GPA) in Major: _		Overall GPA:

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Which academic degree do y	ou intend to pu	ırsue after cor	npleting your B	achelor's Degr	ee:
□ Ph.D. □ M.D/Ph.D	). 🗆 J.	.D. 🗆	Masters	□ Oth	er
Please list the course grades	you have receiv	ved in your ma	ajor:		
Course # & title	Grade		Course # & ti	tle	Grade
	eference letters. ork.		etter should co		sponsibility to make sure that ulty member who knows your
Name		Department/office		Phone	
Briefly indicate your specific experience in independent research, lab experience and/or independent study:					
Please list any academic honors and/or award received (include date received):					
Briefly state your educational and career goals:					

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## C. **Additional information** Briefly indicate your involvement in internship, co-op, volunteer, community service and work experience: Can you speak/write/read a language other than English, (if so list)? Please indicate if you are participating/have previously participated in any of the following programs ☐ Student Support Services Upward Bound □ Educational Opportunity Centers □ Veteran's Upward Bound □ Talent Search ☐ Upward Bound Math & Science ☐ McNair Scholars Program ☐ Fenn Academy □ STARS □ CSU Honors ☐ Choose Ohio ☐ Choose Ohio First □ AHANA □ CSU Scholars ☐ Other (describe): \_\_\_\_\_ Eligibility D. I. First generation

What is the highest level of education attained by your parents or guardian?

, , ,			
Mother: □ Elementary; □ Middle; □ High School; □ Some College; □ Bachelor's; □ Graduate; □ Prof degree			
Father: □ Elementary; □ Middle; □ High School; □ Some College; □ Bachelor's; □ Graduate; □ Prof degree			
Guardian: □ Elementary; □ Middle; □ High School; □ Some College; □ Bachelor's; □ Graduate; □ Prof degree			
Who did you regularly live with prior to your 18 <sup>th</sup> birthday?			
	□ Mother;	□ Father;	□ Other (describe)

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## II. Low-income For financial aid purposes are you considered independent or dependent? □ Independent (go to section A) □ Dependent (go to section B) Section A: Number of household members, including you, spouse, and/or dependents:\_\_\_\_\_ Did you file a federal tax return last year? □ No □ Yes If yes, what was your taxable income? (Line 39 on the IRS 1040 Form) \$ If no, place "0" on the line above. Section B: Number of household members, including yourself: Did your parent(s) file a federal tax return last year? ☐ Yes □ No If yes, what was your family's taxable income? (Line 39 on the IRS 1040 Form) \$ If no, place "0" on the line above. Are you eligible for financial aid? ☐ Yes; □ No If yes, what type? □ Pell grant; □ Loan; ☐ Other (describe): III. Underrepresented Ethnicity: ☐ Hispanic/Latino □ Other (Hispanic/Latino refers to Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race) Race: □ American Indian or Alaska Native □ Asian ☐ Black or African American ☐ Hispanic or Latino □ White □ Native Hawaiian or other Pacific Islander □ Other response (describe): \_\_\_\_\_\_ Please review your application and sign below: To the best of my knowledge, the preceding information is true, complete, and accurate. Signature of applicant Date

Director

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Date



## **STATEMENT OF PURPOSE**

Name	Signature	Date
necessary. Do not exceed two		
Program will enhance your granecessary. Do not exceed two	duate school and other career plans. You	may use a separate sheet if
•	cNair Program selection committee. Expl	•
State your research interest, ex	kperience, educational goals, career objec	ctives and any other information

Rev.: 9/19/2017

## **LETTER OF RECOMMENDATION**

	has applied to be a participant	in the CSU McNair Scholars Program.
We would appreciate your candid res	sponses to assist in our selection	on.
In what capacity have you worked wi	th the student and how long?	
Please comment on the student's aca	demic strengths and weaknes	ses.
If given the encertupity and proper n	reparation do you feel the an	plicant has the notential to do major
If given the opportunity and proper presearch in his/her field of study?	reparation, do you leer the ap	plicant has the potential to do major
What is your basis for this judgment?		
Signature	 Department	Phone
Name and title		Data

Please return through campus mail to McNair Scholars Program SR 155.

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## **TRIO McNair Scholars Program**

#### DO I QUALIFY?

CSU McNair Scholars Program participants must be CSU student with a minimum GPA of 2.8 who are a sophomores or juniors, and who are U.S. citizen or permanent resident.

1. You are a member of a group that is under represented in graduate education [Black

(non-Hispanic), Hispanic, American Indian/Alaskan Native, Native Hawaiians, Pacific

Please check (V) all of the following provisions which apply

No

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Yes

	Island	ers].			
		2. You are a first generation college student. (That is neither of your parents has a 4-year college degree.)			
		3. One of the statements below regarding income applies to you. (Students will be required to furnish documentation of income, such as tax return)			
	(effe	dered a low-income student if your in ective January 31, 2017) is no more th	an the limit belov	v:	1
	Size of Family Unit	48 Contiguous States, D.C., and Outlying Jurisdictions	Alaska	Hawaii	
	1	\$18,090	\$22,590	\$20,790	
	2	\$24,360	\$30,435	\$28,005	
	3	\$30,630	\$38,280	\$35,220	
	4	\$36,900	\$46,125	\$42,435	
	5	\$43,170	\$53,970	\$49,650	
	6	\$49,440	\$61,815	\$56,865	
	7	\$55,710	\$69,660	\$64,080	
	8	\$61,980	\$77,505	\$71,295	
For family units with more than eight members, add the following amount for each additional family member: \$6,270 for the 48 contiguous states, the District of Columbia, and outlying jurisdictions; \$7,845 for Alaska; and \$7,215 for Hawaii. The term "low-income individual" means an individual whose family's taxable income for the preceding year did not exceed 150 percent of the poverty level amount. The figures shown under family income represent amounts equal to 150 percent of the family income levels established by the Census Bureau for determining poverty status. The poverty guidelines were published by the U.S. Department of Health and Human Services in the Federal Register on January 31, 2017.					
 Name	2	Signature		 Dat	e



## **AUTHORIZATION FOR RELEASE OF INFORMATION**

Date:	
CSU ID:	Date of Birth:
Street Address:	
Telephone Number:	-
I,, University to release to TRIO McNair Scholars Progra	authorize the appropriate offices at Cleveland State m records containing the following information,
GPA, earned credits, citizenship, first-generation st year	atus, race, family's taxable income for the preceding
for the purpose of <i>determining my eligibility for the</i>	TRIO McNair Scholars Program
(FERPA). To the extent it is applicable FERPA may pro	cted by the Family Educational Rights and Privacy Act otect the records being released pursuant to this ormation may not make further disclosure without the
I understand that I can revoke this authorization at a person/facility whom I have designed to release the released prior to revocation cannot be retrieved and person/facility receiving the information will be held	information. I understand also that any information neither the person/facility releasing, nor the
I hereby release Cleveland State University, and its tr all claims, demands, legal responsibilities or liability t authorized release of my records their in.	rustees, officers, employees and agents from any and that may arise from or in connection with the
Release authorized by:	Witnessed by:
Student signature	Witness signature
Date	 Date
Rev.: 10/01/2012	



### TRIO McNair Scholars Program

### **GPA and Attendance Policy Agreement**

#### Section 1- GPA Satisfaction

- 1. I understand that if I do not maintain at least a 2.8 overall GPA at the end of the semester, I will not be eligible for McNair sponsored cultural trips for the following semester. Furthermore, if I don't earn at least a 2.8 overall GPA or a 3.0 semester's GPA at the end of the second semester, I will not be eligible for McNair traveling privileges (except for presenting McNair summer research) for the second semester.
- 2. I understand that if my GPA stays below 2.8 for a total of three consecutive semesters, then I will be expelled from TRIO McNair Scholars Program.

#### **Section 2- Attendance and Mentor Reports**

- 1. I understand that I am expected to maintain at least 75% attendance for monthly scholar meetings, at least 50% attendance for McNair sponsored workshops/seminars, and at least 75% submission of McNair mentor reports. If the requirements aren't met, I will not be eligible for McNair sponsored cultural trips for the following semester.
- 2. If I don't improve my attendance and submission of reports to the required level at the end of the second semester, (excluding the summer), I will also be ineligible for McNair sponsored traveling privileges (except for presenting McNair summer research).

Both travelling privileges will be reinstated once all requirements are met provided the McNair scholar hasn't been expelled from the program.

By signing the document below I agree to have read and understood all the terms and conditions above.

Signature:	Date:
Print name:	CSU ID:



# PHOTOGRAPHY/VIDEO MODEL RELEASE

I,			
-	Cleveland State University TRIO out of or in connection with the	McNair Scholars Program from any and all use of the photographs.	
Name (print legibly)		 Date	
Signature		CSU ID	
Note: Under 18 years of age re	equires parental/guardian signature		
Parent/guardian	Relationship	Phone	

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