

Cleveland State University

TRIO McNair Scholars Program

PRELIMINARY APPLICATION

		Date*:						
Name*:		_	CSU ID	*.				
E-mail*:		Phone Number*:						
Citizenship*:	🗆 U.S. Citizen	□ Peri	nanent I	Resident		Other		
CSU Student* Yes No		Full Time*						
Major*:		-	Minor:					
Academic Standing*:	Freshman	Sophomore	2	🗆 Junior		□ Senior		
Grade Point Average (GPA) in Major:			-	Overall GPA:_				
Number of Credits Complete	ed:	Date I	Degree E	xpected*:	_/	_/20		
Are you eligible for financial	aid?*	□ Yes	□ No					
If yes, what type?		Pell Grant	🗆 Loan	Loan 🗆 Other		er		
Are you a low-income student?		□ Yes	□ No					
[The term "low-income student" means an individual whose family's taxable income for the preceding year did not exceed 150 percent of the federal poverty level. See the chart on the back side of this application form for details.]								
Are you a first-generation student?*		□ Yes	□ No					
[The term "first-generation student" means an individual whose parents (or guardians) have not received a four-year degree.]								
Are you from a group under	represented							
in graduate education?*		□ Yes	□ No					
[Groups underrepresented in graduate education include Blacks (non-Hispanic), Hispanics/Latinos, Native Americans, Alaskan Natives, Native Hawaiians, and Pacific Islanders.]								
Signature			Date		_			
* Required fields		allocation form in the state						

Please return the completed application form to the McNair Scholars Program office in Room 155 of the Science and Research Building. You are considered a low-income student if your immediate household income in relation to your family size (effective January 25, 2018) does not exceed the limits listed below:

Size of Family Unit	48 Contiguous States, D.C., and Outlying Jurisdictions	Alaska	Hawaii
1	\$18,210	\$22,770	\$20,940
2	\$24,690	\$30,870	\$28,395
3	\$31,170	\$38,970	\$35,850
4	\$37,650	\$47,070	\$43,305
5	\$44,130	\$55,170	\$50,760
6	\$50,130	\$63,270	\$58,215
7	\$57,090	\$71,370	\$65,670
8	\$63,570	\$79,470	\$73,125

For family units with more than eight members, add the following amount for each additional family member: \$6,480 for the 48 contiguous states, the District of Columbia and outlying jurisdictions; \$8,100 for Alaska; and \$7,455 for Hawaii. 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 18, 2018.