



# MCNAIR SCHOLARS PROGRAM



## McNair Scholars Program Application

### Application Information

Please read application thoroughly and answer all questions fully. **Incomplete applications cannot be processed.** Application should be typed or neatly printed in ink. Statement of Confidentiality: The information contained in this application is for the purpose of determining the applicant's eligibility for the McNair Scholars Program. **All information received is confidential and follows FERPA guidelines.**

### Part I: Applicant Information

Student A#

Date:

Last Name:

First:

Middle Initial:

Local Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
# Street City, ST Zip

Telephone # Local: \_\_\_\_\_ Emergency (with area code): \_\_\_\_\_

Cell Phone # with area code: \_\_\_\_\_

Personal Email: \_\_\_\_\_

TAMUCC Email: \_\_\_\_\_

Gender: ☐ Female ☐ Male Date of Birth: \_\_/\_\_/\_\_\_\_

**What is your race/ethnicity?** (Please check all boxes that describe you.)

☐ Hispanic/Latina/o ☐ White Non-Hispanic ☐ African American/Black

☐ Asian ☐ Native American/Alaskan ☐ Native Pacific Islander (Native Hawaiian, Guamanian, or Samoan)

☐ Other Please specify: \_\_\_\_\_

## Part II: Educational Information

Current TAMUCC class standing (check one): ☐ Sophomore ☐ Junior ☐ Senior ☐ Other (specify): \_\_\_\_\_

Expected class standing by fall: ☐ Sophomore ☐ Junior ☐ Senior ☐ Other (specify): \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_ Department: \_\_\_\_\_

Major GPA: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

Academic Advisor: \_\_\_\_\_

Do you plan to apply to graduate school? ☐ Yes ☐ No

If YES, when you anticipate attending? ☐ Fall 20\_\_\_\_ ☐ Spring 20\_\_\_\_ ☐ Summer 20\_\_\_\_

What graduate institution(s) and program(s) particularly interest you?

(1)

(2)

(3)

Institution: \_\_\_\_\_

Program: \_\_\_\_\_

Prior TRIO program experience: ☐ Upward Bound ☐ Gear Up ☐ Talent Search ☐ EOC ☐ SSS

Other (specify): \_\_\_\_\_

## Part III: Eligibility Information

Are you a U.S. Citizen? ☐ YES ☐ NO (If YES, skip the next question.)

If you are not a U.S. Citizen, please answer the following questions about yourself.

Are you a Permanent Resident? ☐ YES ☐ NO

What is your Permanent Resident Alien Number? A# \_\_\_\_\_

### Part III A: Please answer the following questions about yourself.

- Are you married? ☐ YES ☐ NO
- Do you have children or other dependents (other than a spouse) who receive more than half of their support from you? ☐ YES ☐ NO
- At any time since reaching 13 years of age, were you an orphan, in foster care, or a ward of the court? ☐ YES ☐ NO
- Prior to reaching 18 years of age, were you an emancipated minor or did you have a court-appointed legal guardian? ☐ YES ☐ NO
- Are you serving on active duty (for other than training purposes) in the U.S. Armed Forces? ☐ YES ☐ NO

- f. Are you a U.S. Armed Forces veteran who was on active duty & was released under a condition other than dishonorable? ☐ YES ☐ NO
- g. Are you in college and working on a master's (e.g., M.A., M.S.), professional (e.g., M.D., J.D.), or doctoral degree? ☐ YES ☐ NO
- h. Are you less than 18 years of age and have no parent or guardian? ☐ YES ☐ NO
- i. Are you homeless (i.e., you lack a fixed, regular, & adequate nighttime residence) or are at risk of becoming homeless? ☐ YES ☐ NO

You must answer the following questions about yourself if you are **at least 24 years old** or you answered **YES** to any question in **Part III A**.

Your parent(s) must answer the following questions about themselves if you are **less than 24 years old** and you answered **NO** to all questions in **Part III A**.

### Part III B Financial Information

a. What is the total number of persons (including you) in your family? \_\_\_\_\_

(Please check below only one box. Then, provide the requested income information.)

b. ☐ My family's **taxable (not total) income** from the last calendar year? \$ \_\_\_\_\_

Note: Taxable income can be found on the federal income tax return.  
On IRS Form 1040, see line 15.

c. ☐ My family did not file a federal income tax return for the last calendar year. My family's total income from the last calendar year was: \$ \_\_\_\_\_

d. ☐ My family had no taxable income during the last calendar year.

### Part III C First-Generation Information

**Please answer the following questions about your parents and about yourself:**

Has your mother received/earned a 4-year college degree? ☐ Yes ☐ No

Has your father received/earned a 4-year college degree? ☐ Yes ☐ No

Which parent did you regularly reside with and receive support from, during your childhood (i.e., until you were 18 years old)? ☐ Mother ☐ Both Mother & Father  
☐ Father ☐ Neither Mother or Father

#### Part IV: Certification and Permissions

Please read the following statement and then sign and date below it. **If you (the student) are less than 24 years old and answered NO to all the questions in Part III A, your parent or legal guardian must also read the following statement and then sign and date below it.**

**By signing this application, I attest that all the information on this application is true. Moreover, I hereby certify, to the best of my knowledge, that all the information submitted is complete. I understand that failure to disclose accurate information is grounds for dismissal from the program. You have my permission to give my name, address, transcript, and the information in this application to other educational institutions or organizations that may be interested in providing me with educational or financial opportunities. I also hereby give permission to the Texas A&M University-Corpus Christi, McNair Scholars Program to obtain any and all academic information including college transcripts, acceptance, and financial aid records. I give permission for program staff members to request similar information from this and future institutions to discern the student's educational progress, evaluate the effectiveness of program activities, and fulfill program-reporting requirements.**

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Student's Parent or Legal Guardian (If required):

\_\_\_\_\_ Date: \_\_\_\_\_

**I allow the use of my photograph and other program participation information on the McNair Scholars Program website and other educational publications. ☐ Yes ☐ No**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### Application Package Checklist:

- I have:
- ☐ Completed, signed and dated application
  - ☐ Personal statement addressing future academic goals
  - ☐ Individual Needs Assessment
  - ☐ Two faculty recommendations submitted in sealed envelopes

## Part V: Recommendation Information

- Using the recommendation forms included in the application package, provide two letters of recommendation assessing your motivation and preparation to undertake graduate study. The letters must be from a faculty member, preferably in your academic major. If you are a former participant in any of the TRIO programs listed on Page 2, one recommendation of the two letters can come from the director, counselor, or advisor of the program in which you participated.

### FOR OFFICE USE ONLY

The 20\_\_ federal TRIO programs annual low-income level for a family unit with\_\_ members: \$\_\_\_\_\_

☐ Recommend Approval

☐ Not Recommended

Denial Reason: \_\_\_\_\_

☐ Approved

☐ Denied

Denial Reason: \_\_\_\_\_

\_\_\_\_\_  
Assistant Director (Print Name)

\_\_\_\_\_  
Director (Print Name)

\_\_\_\_\_  
Assistant Director Signature & Date

\_\_\_\_\_  
Director Signature/Date

Date Application Entry into Database \_\_\_\_\_ Initials of Data entry Staff \_\_\_\_\_ File ID \_\_\_\_\_

Student will begin receiving services in: Fall 20\_\_ Spring 20\_\_ Summer 20\_\_

Eligibility: ☐ LI & FG ☐ LI Only ☐ FG Only ☐ Underrepresented ☐ Underrepresented Only