

# McNair Research Scholars

## Program Application

Thank you for your interest in McNair Research Scholars. Below is some information you may want to review before you start the application.

For more information, please contact:

Wendolyn S. Stevens

Project Director

[wstevens@deltastate.edu](mailto:wstevens@deltastate.edu)

P: 662-846-4876

The McNair Research Scholars program at Delta State University provides eligible undergraduate students with paid critical research experiences, preparation for graduate school entrance exams such as GRE, GMAT, MCAT, NCLEX, and Praxis, mentoring, professional skills, and assistance with the graduate application process. We are looking for students who want to enroll in graduate school to ultimately earn a Ph.D.

***Statement of Confidentiality:*** *The information requested in this application is for the purpose of determining the applicant's eligibility for the McNair Research Scholars Program. Information received is treated as confidential.*

Applicant's Name (Please Print): \_\_\_\_\_

Last Name

First Name

Middle Initial

Birth Date: \_\_\_\_\_ DSU ID Number: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Numbers

Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Okramail: \_\_\_\_\_@okramail.deltastate.edu

Alternate E-Mail: \_\_\_\_\_

Race (Please Select): *Multiple selections can be checked*

\_\_\_\_\_ African American/Black

\_\_\_\_\_ Caucasian/White

\_\_\_\_\_ Native American

\_\_\_\_\_ Asian American

\_\_\_\_\_ Pacific Islander

\_\_\_\_\_ Other: \_\_\_\_\_

Ethnicity (Please Select):

\_\_\_\_\_ Hispanic

\_\_\_\_\_ Non-Hispanic/Latino

*(According to Federal McNair Guidelines, Hispanic/Latino refers to a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)*

Citizenship (Please Select):

United States Citizen

Resident Alien

Non Resident Alien

Gender (Please Select):

Male

Female

Other: \_\_\_\_\_

Enrollment Status (Please Select)

Full time

Half-Time/Less

Classification (Please Select):

Sophomore

Junior

Senior

Number of Hours Completed \_\_\_\_\_

Current Status:

Major(s) \_\_\_\_\_

Minor(s) \_\_\_\_\_

Cumulative GPA \_\_\_\_\_ Major GPA \_\_\_\_\_ Projected Graduation Date \_\_\_\_\_

Have you taken a research course (applied, theory, or methods) in your major?

Yes  No

If so, what was the name of the course: \_\_\_\_\_

Do you plan to apply to a graduate degree program (Please Select):

Yes

No

Maybe

Do you have Doctoral degree interest?

Yes

No

**\*\*If necessary, attach additional sheets to answer the questions below. \*\***

Previous Research Experience (If any, name Program, Institution, Year, Faculty Member)

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Academic and Extracurricular Awards, Honors, and Scholarships

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Memberships and Participation in Academic/Campus Organizations and Activities

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Eligibility Criteria

Has either your Mother or Father ever attended college?  Yes  No

If yes, Mother graduated?

Yes  No Level of Degree Attained \_\_\_\_\_

If yes, Father graduated?

Yes  No Level of Degree Attained \_\_\_\_\_

Whom did you live with prior to your 18<sup>th</sup> birthday? (Select All that Apply)

Mother  Father  Other: \_\_\_\_\_

Did your parents file a Federal Tax Return last year?  Yes  No

Did you file a Federal Tax Return last year?  Yes  No

I certify that all the information that is provided in this application is accurate and complete to the best of my knowledge. I authorize each of my references to provide any information required by the University to consider this application, and I release all such persons and organizations from any claims by reason by furnishing such information for records and the right to review this information.

Furthermore, I authorize DSU Faculty, the Office of Admissions, Registrar, Financial Aid, Student Success Center and any other appropriate offices at Delta State University to release transcripts, grade reports, standardized test scores, financial information, midterm evaluations, and other pertinent information to the DSU McNair Research Scholars program.

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

NOTE: In addition to this application, the following information is required to complete your Application packet:

1. A 300 – 500 word essay explaining your interest in the McNair Scholars Program. Explain your academic and career goals and why you want to participate in this program. Include your qualifications that you may have, such as employment, internships, research, laboratory experience, or other skills.
2. Two (2) recommendation forms from someone familiar with your academic work (i.e. faculty member) sent directly to the McNair Research Scholars Office, Kent Wyatt Hall, Suite 239. *The McNair Research Scholars Program Recommendation form must be used. Letters will not be accepted.*
3. A copy of your most recent FAFSA / SAR and current federal income tax return for documentation.

Please return application and supporting documents to:

McNair Research Scholars  
Wendolyn S. Stevens, Project Director  
Kent Wyatt Hall, Suite 239

## McNair Research Scholars

### Recommendation Form (1/2)

**To the applicant:** This recommendation form is to be completed by a professor or supervisor under whom you have studied or worked. Should this be impossible, a teaching assistant, instructor, counselor or past or present employers may be used. Please fill in the first section of this form digitally or print legibly in the fields below.

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(Applicant Last Name)

(First Name)

(Graduate Discipline of Interest)

I authorize each of my references to provide any information required by the University to consider this application, and I release all such persons and organizations from any claims by reason of furnishing such information for records and the right to review this information.

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(Applicant Signature)

(Date)

**To the recommender:** The student listed above has asked you to recommend him or her for the McNair Research Scholars at Delta State University. **Unless expressly indicated by the students on this form, the student has waived their right to view your recommendation.** This Ronald E. McNair Post-Baccalaureate Achievement program is a TRiO program funded by the U. S. Department of Education and Delta State University. The purpose of the program is to help 25 first generation and low income and/or under-represented undergraduates each year conduct research, enroll in graduate school, and eventually earn PhDs.

Successful applicants will earn a stipend for completing a mentored summer research internship and receive significant travel and graduate admissions support. Being a McNair Scholar is a nationally recognized honor with many financial and professional development benefits. Your honest and thoughtful recommendation will help the Selection Committee make an informed decision about whether the McNair Research Scholars is a good match for this student.

Please submit your recommendation to the McNair Research Scholars Program, Kent Wyatt Hall, Suite 239 or to the Project Director, Wendolyn S. Stevens via email to [wstevens@deltastate.edu](mailto:wstevens@deltastate.edu) or fax to 662.846.4313. Letters supplementing the information on this form are welcomed but not required.

Recommender's Name (Please Print): \_\_\_\_\_

Title/Position: \_\_\_\_\_ Department: \_\_\_\_\_

Institution/Organization: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How long have you known the applicant and in what capacity? (Please provide dates) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please rate this applicant in each attribute/skill listed in comparison with others you have known.

	<b>Exceptional (Top 5%)</b>	<b>Outstanding (Top 10%)</b>	<b>Excellent (Top 25%)</b>	<b>Satisfactory (Top 50%)</b>	<b>Below Average (Below 50%)</b>	<b>No Basis for Judgement</b>
Analytical Ability						
Quantitative Skills						
Aptitude for Research						
Use of Technology						
Oral Expression						
Written Expression						
Motivation/Initiative						
Ability to Work with Others						
Ability to Work Independently						
Likelihood for completing a master's or professional degree						
Likelihood of completing a Ph.D						
Emotional Maturity						
Creativity/Imagination						
Open Mindedness						
Commitment						

Recommendation concerning selection for this program (please select one)

\_\_\_ I recommend the applicant with confidence

\_\_\_ I recommend the applicant

\_\_\_ I recommend the applicant with reservation

\_\_\_ I do not recommend the applicant



What are the applicant's greatest strengths and weaknesses with regard to academics, research ability or other characteristics relative to academic success? (Attach additional page if necessary)

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What characteristics does this student possess that will help him or her successfully complete a summer research project on a tight timeline? (Attach additional page if necessary)

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Please provide any additional comments regarding this applicant that are relevant for McNair Scholars Program staff. (Attach additional page if necessary)

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## McNair Research Scholars

### Recommendation Form (2/2)

**To the applicant:** This recommendation form is to be completed by a professor or supervisor under whom you have studied or worked. Should this be impossible, a teaching assistant, instructor, counselor or past or present employers may be used. Please fill in the first section of this form digitally or print legibly in the fields below.

\_\_\_\_\_

(Applicant Last Name)

\_\_\_\_\_

(First Name)

\_\_\_\_\_

(Graduate Discipline of Interest)

I authorize each of my references to provide any information required by the University to consider this application, and I release all such persons and organizations from any claims by reason of furnishing such information for records and the right to review this information.

\_\_\_\_\_

(Applicant Signature)

\_\_\_\_\_

(Date)

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Recommender's Name (Please Print): \_\_\_\_\_

Title/Position: \_\_\_\_\_ Department: \_\_\_\_\_

Institution/Organization: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How long have you known the applicant and in what capacity? (Please provide dates) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please rate this applicant in each attribute/skill listed in comparison with others you have known.

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Quantitative Skills						
Aptitude for Research						
Use of Technology						
Oral Expression						
Written Expression						
Motivation/Initiative						
Ability to Work with Others						
Ability to Work Independently						
Likelihood for completing a master's or professional degree						
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