

**McNair Research Scholars Program  
Program Application  
Delta State University**

Dear Applicant,

Thank you for your interest in the McNair Research Scholars Program here at Delta State University. This program provides eligible undergraduate students with paid critical research experiences, exposure to cultural events and academic programs, 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 seeking students who desire to enroll in graduate school and ultimately complete a doctoral program.

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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. *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  
Project Director  
Bailey Hall, Suite 204**

**Or**

**You may email documents to Barbara Washington at: [bwashington@deltastate.edu](mailto:bwashington@deltastate.edu)**

**If you need any assistance completing your application, you may contact Barbara Washington, Project Coordinator, at 662.846.4911.**

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.*

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**PERSONAL**

DSU 900#:		DOB:	
Last name:		First name:	MI:
<p>Race:</p> <p><input type="checkbox"/> African American/Black <input type="checkbox"/> Caucasian/White</p> <p><input type="checkbox"/> Native American <input type="checkbox"/> Asian American</p> <p><input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other: _____</p>			
<p>Ethnicity (Please Select):</p> <p><input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Non-Latino (<i>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.</i>)</p>			
<p>Gender:</p>			
<p>Citizenship (Please Select):</p> <p><input type="checkbox"/> United States Citizen <input type="checkbox"/> Resident Alien <input type="checkbox"/> Non-Resident Alien</p>			
Permanent Address:		City:	
State:	Zip Code:	Cell:	

Home Phone:	Okramail:
Alternate Email:	

**Education**

Enrollment Status: _____ Full-Time _____ Part-Time		
Classification: _____ Freshman _____ Sophomore _____ Junior _____ Senior		
Number of Hours Completed:	Major:	
Minor:	Major GPA:	Minor GPA:
<p>Have you taken a research course (applied, theory, or methods) in your major?          _____ Yes      _____ No</p> <p>If so, what was the name of the course:</p>		

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

\_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Maybe

Do you have Doctoral degree interest? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Research Experience** (attach additional sheets if needed)

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

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

Year: \_\_\_\_\_

Faculty Member(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

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

Year: \_\_\_\_\_

Faculty Member(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Program Name: _____
Institution: _____
Year: _____
Faculty Member(s): _____
_____
_____

**Academics**

**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

Mother: If yes, graduated? \_\_\_\_ Yes \_\_\_\_ No

If yes, specify level of degree attained: \_\_\_\_ Associate's  
\_\_\_\_ Bachelor's  
\_\_\_\_ Graduate school or beyond

Father: If yes, graduated? \_\_\_\_ Yes \_\_\_\_ No

If yes, specify level of degree attained: \_\_\_\_ Associate's  
\_\_\_\_ Bachelor's  
\_\_\_\_ Graduate school or beyond

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Who did you live with prior to your 18<sup>th</sup> birthday? (select all that apply)

\_\_\_\_\_ Mother

\_\_\_\_\_ Father

\_\_\_\_\_ Other (please specify) \_\_\_\_\_

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

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

**To the best of my knowledge, I certify that all the information provided in this application is accurate and complete. I authorize each of my references to provide any information required by the University to consider this application. 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: \_\_\_\_\_