The California State University, Sacramento McNair Scholars Program is a two-year program designed to prepare selected CSUS students in junior and senior standing, for admission and study at the doctoral level. The McNair Scholars Program admits undergraduate students who show a strong desire to obtain a Ph.D.

ELIGIBILITY CRITERIA

- Low-income background (as defined by the U.S. Department of Education) and be a first generation college student (from a family in which neither parent or guardian has obtained a bachelor’s degree); OR member of a group that is underrepresented in graduate education (African American, Hispanic/Latino, Pacific Islander, or American Indian/Alaskan Native, as defined by federal regulations)
- Completion of 60 units
- Be an undergraduate student enrolled a full-time at CSUS
- Possess a 2.8 minimum GPA
- Be a U.S. citizen or permanent resident
- Be willing to commit to the program requirements. There is a minimum 3-semester commitment while in school that includes summer participation, and 10 years of tracking after completion of the baccalaureate degree.

To apply for the McNair Scholars Program, please submit the following:

- Completed application
- Personal Statement
- Writing Sample
- A copy of ALL college transcripts (including community colleges, other universities and CSUS)
- Three letters of recommendation along with the Recommendation Forms (two must come from faculty members referencing your academic capabilities and one personal i.e., employer, counselor, etc.)
- A copy of a current tax return and financial aid award summary; or documentation of income

Application Deadline: Applications are accepted on an on-going basis.

If you have questions, call (916) 278-5118, email mcnair@csus.edu, or visit the McNair Scholars Office at California State University, Sacramento, Riverfront Center 203, 6000 J Street, Sacramento, CA 95819-6114 or visit us at www.csus.edu/mcnair
# A. PERSONAL INFORMATION

1. **NAME:** __________________________________
   
   Last   First   MI

   **SSN:** ______________

   **CSUS ID:** ______________

2. **ADDRESS:** ___________________________________________________________
   
   Street   City   State   Zip

3. **TELEPHONE NUMBER:** (____) _____-______    **CELL NUMBER:** (____) _____-______

4. **E-MAIL ADDRESS:** ______________________________

5. **GENDER:** FEMALE □  MALE □

6. **DATE OF BIRTH:** ___________ (11/11/11)

7. **PLACE OF BIRTH:** ______________________________
   
   City   State/Zip Code

8. **DATE YOU FIRST ATTENDED COMMUNITY COLLEGE OR UNIVERSITY:** ______________________________

9. **ARE YOU A U.S. CITIZEN:** YES □  NO □  **IF NO, PLEASE COMPLETE THE FOLLOWING:**

   **PERMANENT RESIDENT:** YES □  NO □  **COUNTRY OF CITIZENSHIP:** ______________________________

10. **PLEASE CHECK YOUR ETHNIC IDENTITY (USED ONLY FOR FUNDING SOURCE)**

    □ HISPANIC OR LATINO    □ NOT HISPANIC OR LATINO

    **PLEASE CHECK YOUR RACE (USED ONLY FOR FUNDING SOURCE)**

    □ AMERICAN INDIAN OR ALASKAN NATIVE; TRIBE ______________________________

    □ BLACK, INCLUDING AFRICAN-AMERICAN □ HISPANIC    □ PACIFIC ISLANDER    □ WHITE

11. **Permanent Address of a relative that you do not reside with:**

    ________________________________________________________________
B. FINANCIAL INFORMATION

The information contained in this application is for the purpose of determining eligibility for the CSUS Ronald E. McNair Scholars Program. Information received is treated confidentially.

THE FOLLOWING QUESTIONS WILL DETERMINE IF YOU ARE AN INDEPENDENT OR DEPENDENT STUDENT:

- Are you a veteran of the U.S. Armed Forces? □ Yes □ No
- Are 24 years of age or older? □ Yes □ No
- As of today, are you married? □ Yes □ No
- Do you have children who receive more than half of their support from you? □ Yes □ No
- Are both of your parents deceased, or are you a ward/dependent of the court? □ Yes □ No
- Do you have dependents who live with you & receive more than ½ of their support from you? □ Yes □ No

If you answered NO to every question, you are a DEPENDENT student. Complete Section 1 and provide parents taxes.

If you answered YES to any question, you are an INDEPENDENT student. Complete Section 2 and provide your taxes.

SECTION 1 FOR DEPENDENT STUDENTS

- What is the size of your parents' household, including yourself? ______________________
- Did your parent(s) file a federal tax return? □ Yes □ No
- If yes, what was their taxable income? $______________________
- (Taxable income is found on line 27 on IRS tax form 1040A; line 6 form 1040EZ; or line 43 form 1040)
- If no, place a “0” on the line above for taxable income.

SECTION 2 FOR INDEPENDENT STUDENTS

- What is the size of your household including yourself, spouse, and/or other dependents? _____________
- Did you file a federal tax return? □ Yes □ No
- If yes, what was your taxable income? $______________________
- (Taxable income is found on line 27 on IRS tax form 1040A; line 6 form 1040EZ; or line 43 form 1040)
- If no, place a “0” on the line above for taxable income.

ATTACH A SIGNED PHOTOCOPY OF THE APPROPRIATE FEDERAL INCOME TAX FORM AND A COPY OF YOUR MOST RECENT AWARD LETTER
PART II (FIRST GENERATION VERIFICATION)

Did either of your parents (natural or adoptive) earn a bachelor’s degree? YES □ NO □

1. Please indicate Mother’s highest grade level of education completed:
   (Circle One) 1 2 3 4 5 6 7 8 9 10 11 12
   College degree earned, if any: Associate □ Bachelor □ Master □ Doctorate □

2. Please indicate Father’s highest grade level of education completed:
   (Circle One) 1 2 3 4 5 6 7 8 9 10 11 12
   College degree earned, if any: Associate □ Bachelor □ Master □ Doctorate □

3. Whom did you reside with or receive support from (up to age 18)?
   Mother only □ Father only □ Both parent(s)/guardian(s) □

C. ACADEMIC BACKGROUND

1. Current Institution: _______________________________________________________

2. Current cumulative overall GPA: ______________________________________

3. Please list other academic institutions attended in the space below.

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<th>GPA</th>
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YOU MUST SUBMIT A COPY OF YOUR TRANSCRIPTS WITH YOUR APPLICATION OF ALL COLLEGES ATTENDED
WITH YOUR APPLICATION, INCLUDING A COPY OF YOUR CSUS TRANSCRIPT.

4. What is your current undergraduate major? __________

5. Units Completed _______
6. Have you taken the Writing Proficiency Exam (WPE)? YES □ NO □
   Score ______  Did you pass? YES □ NO □

7. What is your projected graduation date (Semester/Year)? ________________

8. Are you interested in graduate school?  YES □ NO □

9. What is your anticipated graduate major? ______________________________

10. In what field do you wish to pursue a Ph.D. degree? ____________________

11. Will you pursue an academic career in college/university teaching and/or research?  YES □ NO □

12. Please list any research experience –you have had:

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D. ADDITIONAL REQUIREMENTS

RECOMMENDATIONS

Provide three (3) letters of recommendation and three (3) recommendation forms assessing your academic ability, research potential, and your motivation and preparation to undertake graduate study. Two of the letters must be from faculty members in your major. If you are a former participant in any of the TRIO programs (Educational Talent Search, Educational Opportunity Centers, Upward Bound, Upward Bound Math and Science, Veteran’s Upward Bound and Student Support Services) one recommendation must come from the director/counselor of the program in which you participated. Below, please list the names, addresses, and telephone numbers of your recommendation providers.

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PERSONAL STATEMENT

Please respond to the following questions and submit with your application. (3 typed pages maximum).

a.) Provide discuss your reason for wanting to participate in the California State University, Sacramento Ronald E. McNair Scholars Program.

b.) Have you experienced social, economic, or other disadvantages that you have had to overcome? Please discuss the ways in which these experiences have affected your academic opportunities.

c.) Please discuss your academic and career goals, and research interests. In addition, discuss your potential to succeed in a doctoral program.

I certify to the best of my knowledge that the information given on the application is true, accurate, and correct to the best of my knowledge. I further authorize the McNair Scholars Program to request and receive copies of my entire academic and financial aid records, including transcripts, grade reports, financial aid eligibility, and any other information pertaining to enrollment in the McNair Scholars Program at any time they deem necessary.

X

Signature & Date
RECOMMENDATION FORM

Please provide a copy of this form to the individual providing your recommendation. The Recommendation Form and the Summary Evaluation Form must be submitted along with your letter of recommendation.

PART A  TO BE COMPLETED BY THE MCNAIR APPLICANT

Applicant’s Name (please print):

Last  First  MI

Proposed Graduate Department or Program  Degree

Student ID

PART B  TO BE COMPLETED BY RECOMMENDATION PROVIDER

How long have you known the applicant?

In what capacity do you know the applicant?

The Ronald E. McNair Post Baccalaureate Achievement Program prepares first generation, low income and underrepresented juniors and seniors for graduate education through workshops, seminars, lectures and research. Your assessment of the applicant’s personality, character, promise as a scholar, and professionalism will assist the program in selecting the best and most deserving participants. Be sure to include comments relative to the applicant’s strengths and weaknesses. The letter of recommendation should be submitted on letterhead if possible, and returned in a sealed envelope containing the Letter of Recommendation Form and the Summary Evaluation Form. Please place your signature across the seal of the envelope. The envelope may be given to the McNair applicant or mailed to the McNair Scholars Office (Campus Zip: 6114). If you have questions please call (916) 278-5118 or visit the McNair Scholars Office at California State University, Sacramento, River Front Center 203, 6000 J Street, Sacramento, CA 95819-6114. You can also visit us online at www.csus.edu/mcnair.

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Please indicate the strength of your overall endorsement by placing an “X” next to your choice below:

Not Recommended □  Recommended with Reservations □  Recommended □  Highly Recommended □

Signature  Date  Name (Please Print)

Title  Organization/Department

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- Recommended □
- Highly Recommended □

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Signature ________________________ Date ________________________
Name (Please Print) ________________________
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