



**McNair Scholars Program
Wayne State University**

Participant Application Packet

Eligibility

Last Name: _____ First Name: _____ M.I _____

Major _____ SSN: _____ Banner Id: _____

Address: _____

City: _____ State: _____ Zip code: _____ DOB: _____

Phone Number: _____ Email address: _____

Citizenship: US Citizen Gender as listed on Government Issued ID:

Permanent Resident Male Female

Resident Alien Number (if applicable): _____ Gender Pronouns: _____

Enrollment Status: Full-time Part-time Past TRIO Participation: Yes No

Disability: Yes No If yes, please explain: _____

Ethnicity:

African American/Black (other than Hispanic) Native Hawaiian/Pacific Islander

American Indian/Native Alaskan White

Hispanic/Latino Other

Mark ALL Statements that best describe your first-generation college student status:

Neither of your natural or adoptive parent(s) have received a four-year college degree.

You are from a single-parent household and lived with a parent prior to age of 18, and that parent has not received a four-year college degree.

You were an orphan or ward of the court.

None of these statements apply.

List all financial assistance you are currently receiving, including scholarships and work-study:

Current immediate Household Size & Low-Income Levels (as of January 15, 2020)

Family Size	Family Taxable Income	Alaska Only	Hawaii Only
1	\$19,140	\$23,925	\$22,020
2	\$25,860	\$32,325	\$29,745
3	\$32,580	\$40,725	\$37,470
4	\$39,300	\$49,125	\$45,195
5	\$46,020	\$57,252	\$52,920
6	\$52,740	\$65,925	\$60,645
7	\$59,460	\$74,325	\$68,370
8	\$66,180	\$82,725	\$76,095

For family units with more than eight members, add the following amounts for each addition family member: \$6,720 for the 48 contiguous states, the District of Columbia and outlying jurisdictions; \$8,400 for Alaska; and \$7,725 for Hawaii. For more information: <https://www2.ed.gov/about/offices/list/ope/trio/incomelevels.html>

ALL APPLICANTS MUST PROVIDE INCOME VERIFICATION: COPY OF YOUR OR YOUR PARENT’S FILED FEDERAL 2018 INCOME TAX DOCUMENTS OR FAFSA STUDENT AID REPORT

I have a strong desire to attain a PhD or other academic (non-professional) doctorate: ___ Yes ___ No

Academic Standing as of Fall 2019: ___ Freshman ___ Sophomore ___ Junior ___ Senior

Expected Graduation Date: ___ Fall ___ Winter ___ Spring/Summer 20___

Prospective Faculty Mentor

The McNair Scholars Program includes a Mentored Research Experience, in which Scholars complete a research project with a faculty mentor. It is important that each student work closely with a faculty mentor in their field to learn specific details about graduate school expectations related to the field of study. Prior contact with a faculty member is not required. We only require you identify faculty in your discipline/major that you are *interested* in working with. Please list up to three prospective faculty mentors, their department and email.

	Faculty Mentor Name	Department	Email
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Essay

Please write an essay outlining your academic and career goals, research interests, your ideas on what a doctoral degree can do for you, your reason for wanting to participate in the McNair Program, and your desire to teach at the college level or conduct scholarly research. *Essays must be typed, a minimum of 300 words, and well-written. Excessive grammatical errors will affect the participant’s eligibility.*

Complete the following checklist to ensure you have submitted all the required information to receive full consideration.

- ___ Participant application packet (completed accurately)
- ___ Academic Plan via Degree Works signed by your academic advisor
- ___ Essay
- ___ Resume
- ___ Recommendation Forms (Juniors submit two, Sophomores submit one)

At least one must be completed by a teaching faculty member in your department, and the other may be completed by an academic advisor, college counselor, or work supervisor. If you are or were a participant of another TRIO program, one from your counselor or director of that program.

- ___ Unofficial College Transcript
- ___ Income Verification: Copy of your or your parent's filed federal 2018 income tax documents or FAFSA Student Aid Report.

Dependent students are only required to submit their parent's information and independent students are only required to submit their own information. Dependency status determined by Federal Aid regulations.

By my signature below, I certify that the information I provided on and in connection with this application is true, accurate and complete.

Signature

Date

For Office Use Only:

- | | |
|------------------------------|-------------------------------------|
| ___ Signed Application | Eligibility: ___ LIFG or ___ UR |
| ___ Essay | ___ Reported Income |
| ___ Resume | ___ Family Size |
| ___ Unofficial Transcript | ___ GPA |
| ___ Recommendation (Faculty) | ___ Sophomore ___ Junior ___ Senior |
| ___ Recommendation | Status: ___ Accepted |
| ___ Academic Plan of Work | ___ Denied (Reason) _____ |
| ___ Tax Document/FAFSA | |

Approval: Program Director _____ Date _____