



APPLICATION

Please type or print all information and return to the McNair Scholars Program
University of Arkansas at Little Rock
Speech Room 101
2801 S. University Avenue Little Rock, AR 72204

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 treated confidentially. It is the policy of UALR to accommodate students with disabilities, pursuant to federal and state law. Anyone requiring accommodations due to a disability should contact the program staff at the above address or call (501).569.3280. Please note that if you claim Native American/Alaskan Native Heritage, you must provide documents showing this claim.

I. Applicant Information

Name _____ Male
Last First Middle Date of Birth Female

Address _____
City State Zip Code

Phone: (Home) (Cell) (Work) Email Address

Place of Birth Social Security Number T Number Arkansas Resident
 Yes No

Marital Status Single Married Separated Divorced Spouses Name _____
Number of Children _____

Ethnic Heritage
 African American Caucasian Asian American Hispanic
 Alaskan Native Native American Other _____
Citizenship
 US Citizen
 Permanent Resident
 Other _____

Emergency Contact Name Relationship to You Phone

Do You Work Yes No If yes, how many hours per week _____ If yes, are you a UALR Employee Yes No

Do you have a disability Yes No If, yes please describe the disability and necessary accommodations.

II. Educational Information

Did you receive a GED Yes No
If yes, what Year _____

High School Attended City/ State Year Diploma Received

UALR Student Yes No Major _____ Minor _____ Classification _____
Transfer Student Yes No What Institution _____

Cumulative GPA _____ Anticipated Graduation Fall Spring Summer Year _____

Do you have plans to pursue graduate School Yes No If yes in what field of study _____

Do you have plans to pursue a PhD Yes No If yes in what field of study _____

Which of the following best describes your commitment to attend graduate school?

_____ I am thinking about graduate school and would like to explore options.

_____ I am going to graduate school after working one or two years.

_____ I have made a firm commitment to attend graduate school immediately after receiving a Bachelors Degree, but it will be dependent upon financial assistance.

_____ I have made a firm commitment to attend graduate school immediately after receiving a bachelors degree, with or without financial assistance.

_____ I have made a firm commitment to get the Master's Degree, but I am unsure about the PhD.

Selected students participate in a summer research internship. Indicate your research interest within your major field and research interest outside your major field. (Attach additional, sheet if necessary)

List all extracurricular activities *college only* (e.g. campus, civic, community organization)

List all academic honors, distinctions, and/or scholarships you have received (high school and college).

List other academic experience (e.g. internships) you have had that support your application for the McNair Scholars Program.

III. Family Information

Do you receive financial aid Yes No If no, skip Section A & B below.

For financial aid purposes, are you considered dependent or independent? If dependent, complete Section A; if independent, complete Section B.

Section A (Dependent Student)	Section B (Independent Student)
1. What is the size of your parent's household, including yourself? _____	1. What is the size of your household, including yourself, spouse, and /or other dependents? _____
2. Did you parents file a federal income tax form last year? _____ If no put a \$0 for question 3.	2. Did you file a federal income tax form last year? _____ If no put a \$0 for question 3.
3. If yes, what was their taxable income? \$ _____ IRS Form 1040—Line 37 IRS Form 1040A— Line 22 IRS Form 10EZ— Line 5	3. If yes, what was your taxable income? \$ _____ IRS Form 1040—Line 37 IRS Form 1040A— Line 22 IRS Form 10EZ— Line 5

Do you or your family receive assistance from the following sources?

- _____ Aid to families with dependent children (AFDC)?
 _____ Social Security
 _____ Veteran's Benefits
 _____ Food Stamps
 _____ Unemployment Compensation
 _____ State Rehabilitation Benefits
 _____ Other

Educational Attainment of Mother:

Highest Grade Completed: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

College Degree Earned, if any: Associates Bachelors Masters Doctorate

Educational Attainment of Father:

Highest Grade Completed: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

College Degree Earned, if any: Associates Bachelors Masters Doctorate

IV. Additional Requirements for Applicants

Three (3) letter of recommendations, two (2) of which must be from faculty in your major. Each faculty member is requested to send their letter directly to the McNair Scholars Program. In the space below, please list names, titles, addresses, and telephone numbers of the three persons who will submit recommendations.

1. _____
2. _____
3. _____

Who first encouraged you to apply for the McNair Scholars Program? _____

If selected who would you like to serve as your faculty Mentor? _____

Have you participated in another TRIO program? Check all that apply.

_____ Talent Search _____ Upward Bound _____ Student Support Services _____ Educational Opportunity Center

My signature below certifies that the information I have given is true, accurate, and complete to the best of my knowledge. I further understand that any information obtained to the contrary will lead to my immediate dismissal from the McNair program if I am selected. My signature allows the McNair Staff to obtain information concerning but not limited to my financial, academic, and personnel records as they pertain to my admittance into the McNair Program.

Signature

Date

V. Statement of Purpose

The information provided in this section is very important to the selection process. Using the space provided, please comprise a brief essay on your academic and personal objectives. Please include your reason (s) for pursuing a graduate degree, what you hope to accomplish through participating in this program, and how it will assist you with your long term goals. (Minimum 300 words)

OFFICE USE ONLY!

Date Rec _____	Elg _____	Tax _____	Tran _____	FA _____	INS _____	Rec _____	1	2	3	Date Proc. (Adv Board)
_____	Date Accepted _____	_____	Waiting List _____	_____	Letter sent out _____	_____				