Clarkson University is currently among few universities nationwide selected to host a Ronald E. McNair Post-Baccalaureate Achievement Program on its campus. Established by the U.S. Department of Education, the program is named for astronaut and Space Shuttle Challenger crew member Ronald E. McNair. Through this program, qualified students participate in skill building and enrichment activities which prepare them for doctoral study.

At Clarkson University, students are selected each year to participate in the program which is designed to assist them in preparing for and pursuing graduate study. The program is highlighted by a ten - week summer research internship for which a McNair Scholar receives a stipend plus an allowance for room and board. Students enter the program when completing their sophomore year, and are eligible to participate for two years. A limited number of juniors may be selected for entrance to the program as spaces are available.

TO QUALIFY YOU MUST BE:

1. A first-generation college student (neither parent completed a bachelor’s degree or, if you only lived with one parent, he/she did not receive a degree) AND meet federal income guidelines
   Or
   A member of a group that is underrepresented in graduate education: African American, Hispanic, Native American

   AND ARE
2. A United States citizen or permanent resident
3. Completing your sophomore or junior year
4. Maintaining a GPA of at least 2.8
5. Majoring in or have an interest and background in science or engineering

Statement of Confidentiality: The information contained in this application is for the purpose of determining the applicant’s eligibility for the McNair Scholars Program. Information received is treated confidentially.

*** Respond to all questions in each section. ***

MAIL ALL INFORMATION AND DIRECT QUESTIONS TO:
Clarkson University
Ronald E. McNair Scholars Program
Box 5801, 235 Bertrand H. Snell Hall
Potsdam, New York 13699

Phone: 315-268-3951 Fax: 315-268-6552
E-Mail: cupo@clarkson.edu

POSTMARK DEADLINE: JANUARY 20, 2017

Marjorie Warden, Program Director  •  Mike Ramsdell, PhD, Director of Research
• Deborah Sutliff, Assistant Director  •  Supriya Parshad, Program Coordinator
I. APPLICANT INFORMATION Applicant must meet eligibility requirements as listed in the McNair Scholars literature.

Name
Mr./Ms. First MI Last

Current Campus Mailing Address
(Street and number or P.O. Box)

City State Zip Code Telephone Number

Permanent/Home Address
(Street and number or P.O. Box)

City State Zip Code Telephone Number

E-Mail Address:

Date of Birth Place of Birth City State Nation

Social Security # First date of undergraduate enrollment

II. ELIGIBILITY INFORMATION

(You must attach a copy of your/your family’s 2015 Federal Income Tax form - IRS Form 1040 pages 1 and 2; IRS Form 1040A page 1; IRS Form 1040EZ page 1)

I regularly resided with and received support from: € both parents € mother only € father only € legal guardian

Provide the following information only for the parent(s) or guardian with whom you regularly resided:

Name of Mother/Guardian: First MI Last

Her Highest Grade of Education Completed: <8 9 10 11 12 € Associate’s € Bachelor’s € Master’s € Doctorate

Name of Father/Guardian: First MI Last

His Highest Grade of Education Completed: <8 9 10 11 12 € Associate’s € Bachelor’s € Master’s € Doctorate

ARE YOU A FIRST-GENERATION COLLEGE STUDENT? € Yes € No

(First-generation college student: neither parent has a bachelor’s degree or, if you regularly resided with and received support from only one parent, that parent did not complete a bachelor’s degree.)

IF YOU’RE PARENTS CLAIM YOU AS A DEPENDENT:
Including you, how many people are in their household?

On their 2015 federal income tax form, what is their Total Taxable Income? (line 43 of 1040, line 6 on 1040EZ, line 27 on 1040A)

IF YOU ARE A FINANCIALLY INDEPENDENT STUDENT:
Including yourself, how many people in your household are financially dependent on you?

On your 2015 federal income tax form, what is your Total Taxable Income? (line 43 of 1040, line 6 on 1040EZ, line 27 on 1040A)

ARE YOU RECEIVING FINANCIAL AID? € Yes € No If yes, specify type of aid:

ARE YOU A U.S. CITIZEN? € Yes € No

If not, do you have permanent resident status? € Yes, Registration # € No

RACIAL/ETHNIC BACKGROUND: € African American € Native American/Alaskan Native € Asian American 
€ Mexican American/Puerto Rican/Other Hispanic American € Other (Please specify)
III. EDUCATION INFORMATION (You must attach a legible copy of college-level transcripts from all institutions attended)

A. Name of the college or university you are presently attending: _____________________________

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

B. What is your current major or area of concentration? _______________________________________

C. Class officially completed by June 2017: € Sophomore  € Junior  Expected Graduation Date: ___________________________

Number of credits to be completed by June 2017? __________ What is your cumulative GPA? _______________

D. Do you plan to pursue: € Masters  € Ph.D.  € other: __________________________________________

IV. ADDITIONAL REQUIREMENTS FOR APPLICANTS

A. LETTERS OF RECOMMENDATION. Two (2) letters are required from faculty members, with at least one from your major, who can best assess your ability for academic research, your confidence, and your motivation to attend graduate school. They may use the form included in this application packet. Please ask each recommender to send the letter/form directly to McNair Scholars Program, Clarkson University, P.O. Box 5801, Potsdam, NY 13699-5801, by January 20, 2017. List the names, titles addresses, and telephone/fax numbers of your three recommenders:

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Address</th>
<th>Telephone</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Address</th>
<th>Telephone</th>
</tr>
</thead>
</table>

B. In the space provided, if applicable, please give the name, title address, and telephone number of the person(s) who first encouraged you to apply to the McNair Scholars Program. If you are self-referred, please tell us how you heard about the program.

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Address</th>
<th>Telephone</th>
</tr>
</thead>
</table>

How you became aware of the program: ________________________________________________________

C. PERSONAL STATEMENT. On no more than 2 typewritten pages (double spaced), please write your personal statement. Be sure to include information listed below. Be specific and concise.

• Who are you? (How does your personal background and attributes match your desire to obtain research experience and graduate school preparation?) • What are your graduate education goals (how important is it to you to pursue a master’s and/or Ph.D. degree) and career goals; • What research topics/fields/departments are of interest to you; • List prior research experience, if any, identifying the research, your supervisor, and where the research took place; • What are your work standards (include punctuality, ethics, discipline, and ability to persevere although results may not be readily apparent); • What are your expectations for your experience in the summer portion of the program (academic and otherwise)?

D. HAVE YOU PARTICIPATED IN ANY OF THESE PROGRAMS: € HEOP  € EOP  € CSTEP

€ Talent Search  € Upward Bound  € Student Support Services  € McNair  Location: ________________________________

My signature below indicates that, to the best of my knowledge, I have given you on this application true statements, complete and accurate. With my signature, I hereby grant permission to McNair Scholars at Clarkson University to use my name and/or photograph for editorial, promotional, recruitment, or educational purposes. I hereby authorize colleges, universities, and any post-baccalaureate institutions that I may attend in the future to release McNair Scholars at Clarkson University, upon their McNair Scholars request, copies of academic, enrollment, and financial assistance records.

Date ______________________ Signature

(An original signature must be on file. Please be sure to forward original application if initial application is faxed.)