



## Ronald E. McNair Post-Baccalaureate Achievement Program

University of Massachusetts Boston  
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# Application for Admission

## Ronald E. McNair <sup>1</sup> Post-Baccalaureate Achievement Program



Funded by a grant from the U.S. Department of Education

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<sup>1</sup> The Dr. Ronald E. McNair Post Baccalaureate Program is a federal funded activity of the Department of Educational Support Programs (a division of the College of Science and Mathematics at the University of Massachusetts of Boston).

*Statement of Confidentiality:* The information requested in this application is for the purpose of determining the applicant's eligibility for the McNair Scholars Program. Information received is treated as confidential.

## ABOUT RONALD E. MCNAIR

Ronald E. McNair graduated from North Carolina A&T State University with honors in physics, and earned a Ph.D. in physics at M.I.T. An expert in laser physics, he was selected by NASA in 1978 for the space shuttle program and was a mission specialist aboard the shuttle flight in 1984. After his death in the Challenger space shuttle accident in 1986, Congress provided funding for the Ronald E. McNair Post-Baccalaureate Achievement Program to encourage students such as you to enroll in graduate studies.

*"Before you can make dreams come true, you must first have one."*

Ronald E. McNair, Ph.D.

## PROGRAM REQUIREMENTS

**McNair Scholars Eligibility Checklist**— Please check the boxes that apply to you:

- ☐ Must be interested in obtaining a Ph.D. degree<sup>2</sup>
- ☐ Must be either a citizen or a permanent resident of the United States
- ☐ Must have completed more than 30 credits by May 202\_\_\_\_
- ☐ Must have a GPA of at least 3.0 by the end of Spring 202\_\_\_\_
- ☐ Must be **either**: 1) a low-income<sup>3</sup> **and** first-generation college student<sup>4</sup>  
**or** 2) underrepresented in higher education<sup>5</sup>
- ☐ Must be enrolled at UMass Boston majoring in a science, technology, engineering, and mathematics (STEM)
- ☐ Must be enrolled at UMass Boston during Spring 202\_\_\_\_
- ☐ Must be available to do full time research in Summer 202\_\_\_\_ or Academic Year 202\_\_\_\_ - 202\_\_\_\_

*If you have checked all the boxes above, then you are eligible to apply to become a McNair Scholar.*

**Application Materials Checklist**— Please use this list to complete your application:

- ☐ Complete and Signed Application
- ☐ A copy of your Student Aid Report (SAR)
- ☐ A copy of your parent(s)' federal income form (I-1040, I-1040A, or I-1040 EZ) documenting taxable income for the previous calendar year. (Summary only. This is usually 1-2 pages long. See income section of this application on page five.)
- ☐ Official copy of your Transcripts
- ☐ Research Proposal (if applicable)
- ☐ Two Letters of Recommendation. One letter of recommendation must come from a UMass Boston faculty member.

*Please return these checklists with your application as a PDF file to [McNair.umb.edu](http://McNair.umb.edu).*

<sup>2</sup> The McNair Scholars Program is strictly for students who are committed to pursuing a Ph.D. degree. Students solely interested in medical, legal, or other professional degrees should not apply. Students who go on to pursue a M.D./Ph.D. can be part of the McNair Scholars Program.

<sup>3</sup> Low income is defined by the Federal government using the family's taxable income from IRS Form I-1040 (line 43), I-1040A (line 27), I-1040EZ (line 6). Please see the Department of Education website: <http://www.ed.gov/about/offices/list/ope/trio/incomelevels.html> for low-income level determinations

<sup>4</sup> The US Department of Education defines first generation college student as a student who has not resided with, or received primary support from, a parent who has received a B.A. degree or its equivalent.

<sup>5</sup> African American/Black; Alaska Native; American Indian; Hawaiian Native or Other Pacific Islander (Guam & U.S. Territories); Hispanic/Latino students are considered underrepresented in higher education.

Please note that the following questions are asked because this program is federally funded by the Department of Education, and, as such, grants are based upon the population being served. These categories are reported anonymously. The information provided will remain confidential; and any income information you provide will not affect your financial aid status.

**PART I: DEMOGRAPHIC INFORMATION**

Name: \_\_\_\_\_  
Last First Middle Initial

Local/Mailing Address: \_\_\_\_\_  
Apartment No.

\_\_\_\_\_  
City State Zip Code

Permanent Address: \_\_\_\_\_  
Apartment No.

\_\_\_\_\_  
City State Zip Code

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: ☐ Male ☐ Female

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

UMB E-mail Address: \_\_\_\_\_ Non-UMB E-mail Address: \_\_\_\_\_

UMB Student ID No.: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

How did you hear about the McNair Program? \_\_\_\_\_

Please provide the names and permanent addresses of two people who will know how to reach you in the future (i.e., parents or other relatives).

1. Name of Relative/ Permanent Contact: \_\_\_\_\_

Relationship to the Applicant: \_\_\_\_\_

Address: \_\_\_\_\_  
Apartment No.

\_\_\_\_\_  
City State Zip Code

2. Name of Relative/ Permanent Contact: \_\_\_\_\_

Relationship to the Applicant: \_\_\_\_\_

Address: \_\_\_\_\_  
Apartment No.

\_\_\_\_\_  
City State Zip Code

**PART II: ELIGIBILITY INFORMATION**

**VERIFICATION OF U. S. CITIZENSHIP/ PERMANENT RESIDENT STATUS**

Social Security Number: \_\_\_\_\_

Are you a United States citizen? ☐ Yes ☐ No

If not, what is your country of citizenship? \_\_\_\_\_

If you are not a U.S. citizen, please provide your Alien Registration Number: A \_\_\_\_\_

*If you are an eligible non-citizen, you must provide a copy of front and back of your Alien Registration Card.*

**ETHNICITY AND RACE**

*Please respond to each of the following two questions.*

1) Ethnicity: Are you Hispanic/Latino?<sup>6</sup> ☐ Yes ☐ No

2) Race (Please check all that apply. At least one):

- ☐ Black or African American ☐ American Indian or Alaska Native  
☐ Asian ☐ Native Hawaiian or Other Pacific Islander  
☐ White

**PARENTS' EDUCATIONAL BACKGROUND**

*Please respond to each of the following two questions.*

With whom do you live?

- ☐ Both parents/adoptive parents ☐ Father/adoptive father only ☐ Guardian(s)  
☐ Mother/adoptive mother only ☐ Other \_\_\_\_\_ (please specify)

With whom did you reside prior to age 18?

- ☐ Both parents/adoptive parents ☐ Father/adoptive father only ☐ Guardian(s)  
☐ Mother/adoptive mother only ☐ Other \_\_\_\_\_ (please specify)

Check the highest education level completed by each parent before ***your*** 18<sup>th</sup> birthday:

	Elementary School	GED/High School	2 Year College	4 Year College (Received Bachelor's Degree)
Mother/ adoptive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Father/ adoptive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*If your parent(s) graduated from a four-year college, what country was the degree completed in and what degree was received?*

Mother: Country \_\_\_\_\_ Degree \_\_\_\_\_

Father: Country \_\_\_\_\_ Degree \_\_\_\_\_

<sup>6</sup> 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. As such, every Hispanic/Latino person has an associated race(s) as noted below).

## **INCOME INFORMATION**

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

<b>Section A Dependent Students</b>	<b>Section B Independent Students</b>
What is the size of your parents' household, including yourself? _____	What is the size of your household, including yourself, your spouse, and/or other dependents? _____
Did your parent(s) file a federal tax return for 202__? __ Yes __ No	Did you file a federal tax return for 202__? __ Yes __ No
If yes, what was their 20__ taxable income? (line 43 on IRS form I-1040; line 27 on form I-1040A; line 6 on form 1040EZ) \$ _____	If yes, what was your 20__ taxable income? (line 43 on IRS form I-1040; line 27 on form I-1040A, line 6 on form 1040EZ) \$ _____
If no, place a "0" on the line for taxable income	If no, place a "0" on the line for taxable income
<b>Please attach 1) a copy of your parents' federal income tax forms, or 2) copy of your most recent SAR or FAFSA.</b>	<b>Please attach a copy of 1) your federal income tax forms, or 2) a copy of your most recent SAR or FAFSA.</b>

*If you do not provide a Student Aid Report, you must provide a signed statement from your parent(s) attesting to their highest level of education completed.*

*For the purpose of documentation, please attach to your application a copy of the appropriate federal income form (I-1040, I-1040A, I-1040 EZ).*

*If you are unable to provide a copy of the appropriate income form, please submit a signed statement, attesting that your parents and/or you did not file.*

Your signature below certifies that these facts are true:

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

### PART III: EDUCATIONAL INFORMATION

Anticipated numbers of units completed after Spring semester 202\_\_ : \_\_\_\_\_

Projected graduation date (Semester and Year): \_\_\_\_\_

Have you taken research methods course in your major: ☐ Yes ☐ No

If not, do you plan to take a research methods course in Fall semester 20\_\_? ☐ Yes ☐ No

Current major: \_\_\_\_\_ Current Minor: \_\_\_\_\_

Faculty Advisor: \_\_\_\_\_

Cumulative UMB GPA: \_\_\_\_\_ Cumulative Major GPA: \_\_\_\_\_

What is your projected date of entrance into graduate school? \_\_\_\_\_

In what field do you wish you pursue a Ph.D. degree? \_\_\_\_\_

Have you been involved in research activity? ☐ Yes ☐ No

If yes, please explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Note: A copy of your most recent official transcripts, must be submitted to verify your UMB GPA.

### PART IV: PERSONAL STATEMENT

Your personal statement are vital parts of the application and are closely reviewed. Please answer the following prompts on separate sheets of paper. The documents should be typed, double-spaced and in 12pt font.

Please state briefly (in 400 words or less) your academic goals and career goals, and how participation in the McNair Program will assist you in achieving these goals; paying special attention to how a Ph.D. is essential to those pursuits.

Optional: In 200 words or less, provide any additional information you would like us to consider.

Provide the names and departments of two UMB Faculty Members who you believe would be ideal mentors for your research project.

Mentor 1: \_\_\_\_\_

Mentor 2: \_\_\_\_\_

Have you discussed this project with either or both professors? ☐ Yes ☐ No

## PART V: LETTERS OF RECOMENDATION

### **FINANCIAL AID STATUS**

*Please check the appropriate box:*

- ☐ I have already applied for financial aid for Fall 202\_\_
- ☐ I plan to apply for financial aid for Fall 202\_\_, but have not yet filed my Financial Aid Form.
- ☐ I have been made aware of financial aid opportunities and procedures for application, but choose not to apply at this time.

*Please check the appropriate box:*

Are there any reasons why you might not be able to attend the monthly UMB McNair Program seminars on Saturdays? ☐ Yes ☐ No

If yes, please state why: \_\_\_\_\_

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Are there any reasons why you might not be able to attend the annual UMB McNair Program Nantucket Weekend Research Seminar, in April? ☐ Yes ☐ No

If yes, please state why: \_\_\_\_\_

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## PART VI: CERTIFICATION AND RELEASE OF INFORMATION

This release form enables the McNair Program at UMass Boston to obtain copies of information regarding admission and financial aid packages and grade reports for the purpose of determining eligibility, developing educational plans, and reporting program statistics. Aspects of this information and the nature of your participation in the McNair Program may be shared with other university personnel in accordance with federal regulations and University policy. You have access to all of your records with the Program, excluding letters of recommendation.

With my signature, I hereby grant permission to the staff of UMass Boston, and specifically the McNair Program, to access my student record and post-secondary records including academic, enrollment, and student aid award information from the college(s)/university(s) I have attended, attend, or will attend.

I understand that all information will be kept confidential, and that the information shall only be transferred to a third party outside UMass Boston and the McNair Program on the condition that my written consent is first obtained.

IN ADDITION, I CERTIFY THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS COMPLETE AND ACCURATE.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

## PHOTO, VIDEO, AND INFORMATION RELEASE AGREEMENT

I (Applicant Name) \_\_\_\_\_ grant the University of Massachusetts, Boston Ronald E. McNair Scholars Program the right to use my name and picture, without compensation to me, in electronic media (i.e., websites and emails) and written materials (i.e., advertising material and brochures) for promotional fund raising and educational purposes.

I also grant the University of Massachusetts, Boston Ronald E. McNair Scholars Program permission to release contact information to the Department of Education, graduate school programs, and other educational institutions. I understand that the University of Massachusetts, Boston Ronald E. McNair Scholars Program will use my information for promotional and educational purposes. I hereby agree to hold the University of Massachusetts, Boston Ronald E. McNair Scholars Program, its staff, and its affiliates harmless from any liability resulting from the use of the information, text, and pictures herein submitted.

\_\_\_\_\_  
**Name (Print)**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**



**STAFF USE ONLY**

Date Reviewed: \_\_\_\_\_

Date of First Interview: \_\_\_\_\_

Date of Second Interview: \_\_\_\_\_

Accepted: \_\_\_\_\_

Denied: \_\_\_\_\_

**THE FOLLOWING SECTION IS TO BE FILLED OUT BY A STAFF MEMBER**

The student is eligible for McNair? (Please check one) ☐ Yes ☐ No

Documentation:

☐ Signed Application

☐ Income Tax Forms

☐ Student Aid Report or other documentation

☐ Verification from other government agency

☐ Signed FA Application

☐ Other documentation (please specify) \_\_\_\_\_