

## **Application for Admission**

McNair Scholars Program, Kansas State University 1101 Mid-Campus Dr. N. | Manhattan, KS 66506 007 Holton Hall | (785) 532-6137 | www.k-state.edu/mcnair

Date:	Name:	E-Mail:		
Last / First / Middle Initia		K-State Student ID #:		
Local Address:		Permanent Address:		
Street	Street			
City / State / Zip Code	City / State / Zip Code			
Mobile Phone:		Home Phone:		
Hometown:		Birth Date:		
Have either of your p (bachelor's) degree?  Yes No  Have you received a Yes No  Your 2022 Tax Inform Filing Status: Dep Number of Dependent Parent/Guardian 202 If you file as dependent individual who claims you Number of Dependent How do you identify Alaskan Native Hispanic Na	prior four-year (bachelor's) degration (Form 1040): endent Independent s: Taxable Income: \$	ee?  in 10  or the  in 10  ipply.	Sex (of federal record):  Male Female  (Optional) Self-identified Sex:  (Optional) Pronouns:  McNair is open and inclusive. This information will only be available to program staff to ensure applicants are treated with dignity and acknowledgement of their identity. Student privacy will be protected. This information will not be utilized in acceptance decisions.  STAFF USE ONLY  First-generation  Income-limited  (per FAFSA or tax information)  Underrepresented  Interview Date:  Acceptance Date:	
Are you a transfer st	udent? $\square$ Yes $\square$ No Have ye	ou attended a co	ommunity college? $\square$ Yes $\square$ No	
	rned at other institutions: ate: K-State Cumulati		_ Enrolled Full Time: $\square$ Yes $\square$ No	
			ected Graduation:	
Proposed fields of g			Semester / Year	
Your highest degree	objective: Master's Ph.D	O. Other:	Uncertain	
Past TRIO Participati	ion:		d Bound	
If applicable, dates a	nd location:			

References: Please list the names of two (2) faculty <i>you w</i> Form and ask them to write you a letter of recommon and a sk them to write you a letter of recommon and a sk them to write you a letter of recommon and a sk them to write you completed and at least institution faculty.	commendation. We	recommend that you hav	e at least one referen	ce who taught a course
Name / Position / Address				<del></del>
Name / Position / Address				<del></del>
Academic Records				
☐ Provide current K-State transcripts ☐ Provide transcripts, if any, from all of have attended. These may be unofficial c		institutions (community	colleges, colleges, ur	niversities, etc.) you
Compare yourself to your peers	Exceptional	Very Strong	Strong	Needs Improvement
Academic Performance				
Written Expression				
Oral Expression				
Emotional Maturity				
Motivation for Graduate Study				
Potential in Field				
participation in the program. Please include a your application. Please type, double space, (A suggested length is about 1000 words, but Statement of Understanding I understand that participation in the McNair year and 30+ hours/week of research, GRE propublic-facing article, an abstract, and a present activities. I will also be expected to maintain or to receive services from the McNair Schola	and sign and date the focus will be or Scholars Program is rep, and seminars in tation of my summ a minimum 3.0 cum ars staff.	your statement and income not content, not word countent a rigorous commitment in the summer. I will be exter research. Program statementative GPA. There is not content to the summer of the summer o	to weekly seminars of the prepare a just of will assist me in prepare to cost to me for particular to the prepare to cost to me for particular to the prepare to cost to me for particular to the prepare	during the academic ournal-aiming article, a eparing for these cipation in the activities
☐ I understand that the McNair staff use established eligibility requirements for I certify that the information provided ☐ I have read the Statement of Understare I hereby release the McNair Scholars Education and the staff and faculty at The McNair Scholars program staff habout my financial records to determine	or participation in the d is accurate. Anding.  Program to obtain a K-State that have a has permission to co	and provide information need and a right to knowntact the Office of Stude	from and to the U.S. v about my academic	Department of progress/performance.
Signature:		Date:_		
Submission Instructions All application files are submitted via Canvas must request access to the McNair Application	* *	nts Priority	y Deadline: Oct	tober 5, 2024

Interview invitations are typically sent two (2) weeks after the priority deadline. Applications will be considered as openings remain. If you have questions, please email mcnair@ksu.edu.