

University of South Florida  
Ronald E. McNair  
Post Baccalaureate Achievement Program

Student Application



Application Deadline: October 20, 2008

Send Completed Applications to:

University of South Florida  
McNair Scholars Program  
4202 E. Fowler Ave. BEH 305  
Tampa, FL 33620

Telephone: (813) 974-7935  
Fax: (813) 974-5762

University of South Florida  
**Ronald E. McNair Post-Baccalaureate Achievement Program**  
**APPLICATION**

PLEASE PRINT OR TYPE

**Student Information**

*Name* \_\_\_\_\_ *Gender* \_\_\_\_\_ *Social Security #* \_\_\_\_\_

*Local Address* \_\_\_\_\_

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

*Local Telephone #* \_\_\_\_\_ *Cellular* \_\_\_\_\_

*Permanent Address* \_\_\_\_\_

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

*United States Citizenship*  *Yes*  *No* *Permanent Resident*  *Yes*  *No*  *Other* \_\_\_\_\_  
(If Yes, include photocopy of Resident Card)

*Race/Ethnicity*  *African American (includes Caribbean American)*  *Asian American*  
 *European American*  *Hispanic American*  *Native American*  *Other*

**Academic Information**

*USF College or Transfer Institution's Name* \_\_\_\_\_

*Declared Major* \_\_\_\_\_

*Student Classification*  *Sophomore*  *Junior*  *Senior*

*Expected Graduation Date* \_\_\_\_\_ *ACT/SAT Composite Score* \_\_\_\_\_

*Major/discipline you consider studying in graduate school* \_\_\_\_\_

*Total number of credit hours completed* \_\_\_\_\_

*Current Cumulative Grade Point Average (CUM GPA)* \_\_\_\_\_

*Estimated Major Grade Point Average (MAJOR GPA)* \_\_\_\_\_

***Provide information requested below for courses you have taken while in college, in these areas:  
English/literature, math, science, statistics.***

<i>Course Prefix &amp; Number</i>	<i>Name</i>	<i>Hours</i>	<i>Grade</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Prior Program Services**

Check if you have participated in any of these programs:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Student Support Services | <input type="checkbox"/> USF Honors Program        | <input type="checkbox"/> Minority Engineering Program |
| <input type="checkbox"/> Upward Bound             | <input type="checkbox"/> Black or Hispanic Scholar | <input type="checkbox"/> Area Health Education Center |
| <input type="checkbox"/> Talent Search            | <input type="checkbox"/> Latino Scholarship        | <input type="checkbox"/> Personal Excellence Program  |
| <input type="checkbox"/> Other: _____             |  |   |

List any academic experiences you have had that support your candidacy for the McNair Scholars Program: \_\_\_\_\_

\_\_\_\_\_

**Financial Information**

Are you claimed as dependent by parent (s) for Internal Revenue Services (IRS) purposes?  
 Yes  No (If yes, Please attach a copy of your parents 1040 and W-2 forms)

Do you claim independent status?  Yes  No (If yes, Please attach your 1040 and W-2 forms)

Are you married?  Yes  No Do you have any dependents?  Yes  No

Are you eligible for financial aid at USF?  Yes  No  
(If yes, please attach a copy of eligibility from your financial aid office)

\_\_\_\_\_

List All Scholarships you have been awarded: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you regularly resided with, and received support from at least one parent who completed a Bachelor's degree?    \_\_\_ Yes    \_\_\_ No

Did your mother complete a baccalaureate degree?    \_\_\_ Yes    \_\_\_ No

Did your father complete a baccalaureate degree?    \_\_\_ Yes    \_\_\_ No

**References**

List two references --including **names, titles, and telephone numbers**-- you have asked to provide letters of recommendation to support this application; *one should be from faculty and another from an advisor.*

Name	Title	Telephone Number
1. _____		
2. _____		

**Personal Statement**

Complete a brief narrative (at least 500 words) that explains your desire to pursue a doctorate degree or medical degree. Describe your career goals and relate those goals to why you are applying to the McNair Scholars Program. Please use complete sentences. Type your statement and attach it to this application.

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I certify that all the information included above is accurate:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



In order for this application to be reviewed it must include all the following:

**Official copies of all college transcripts,  
At least two letters of recommendation, and  
Copies of all applicable tax forms (2007), or official Financial Aid Award (2008-2009).**

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**Return Completed Application to USF McNair Office in BEH 305 (3<sup>rd</sup> Floor Graduate School) or  
Mail to: University of South Florida, 4202 E. Fowler Ave. BEH 301, Tampa FL 33620 or  
Fax to (813) 974 – 5762. Email: [vbenavides@grad.usf.edu](mailto:vbenavides@grad.usf.edu) or call (813) 974 – 7935 for questions.**

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# University of South Florida

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**McNair Scholars Program**  
**4202 E. Fowler Ave. BEH 305, Tampa, FL 33620**  
**Telephone:(813) 974-7935 Fax: (813) 974-5762**

September

Dear Applicant:

I am delighted that you have chosen to complete an application for the USF McNair Scholars Program. Before you complete the enclosed application form, please review the list below to ensure that you meet the required criteria in order for your application to be reviewed.

This year's Application Deadline is **October 20, 2008**. All applicants will be notified of the selection results in November 2008.

Sincerely,

Dr. Joan B. Holmes, Director  
McNair Scholars Program

**Required Criteria for All Applicants to the McNair Scholars Program:**

- ◆ Must have officially declared a major.
  - ◆ Must have completed the sophomore year (60 credit hours).
  - ◆ Must have an earned cumulative grade point average of 3.0 or higher (in a 4.0 scale).
  - ◆ Must be a citizen or permanent U.S. resident.
  - ◆ Must be low income and first generation college student, or belong to an underrepresented group in doctoral studies.
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