





STUDENT APPLICATION

		Date:
A. Personal Information	tion	
First Name:	Middle Name:	Last Name:
Banner ID#:		
Local address (number,	street, apartment, city, state, zip code)
Telephone Number:		
Permanent Address (nur	nber, street, apartment, city, state, zip	code)
Permanent Telephone N	umber: Cell	Phone Number:
Bronco Email:	Alternate I	E-mail:
Birth Date://	Birth Place:	
Gender: □ Female	□ Male Marital Status: □ S	ingle Married Divorced
What is your citizenship	status? 🗆 US citizen 🗆	US Permanent resident
	*(if permanent resident, ple	ease provide copy of INS documentation)
Are you military affiliate	ed? □ Yes □ No	
If yes, state affi	liation:	7es □ Dependent Child □ Spouse
B. Eligibility		
I. First generation		
What is the highest level	of education attained by your parent	s or guardian?
Mother:		
 Elementary Graduate 	□ Middle □ High School □ □ Professional degree	Some College
Father:		
 Elementary Graduate 	□ Middle □ High School □ □ Professional degree	Some College

Guardian:				
□ Elementary □ Graduate	□ Middle □ Professional	•	□ Some College	□ Bachelor's
Who did you regularly l	ive with prior to	your 18 th birthday	?	
□ Mother	□ Father	□ Other (descri	be)	
II. Low-income				
For financial aid purp	<mark>oses are you con</mark>	sidered independ	lent or dependent?	
□ Independent (go to se	ection A)	□ Depe	endent (go to section B)	
Section A: Number of hou	sehold members,	including you, sp	ouse, and/or other deper	idents:
Did you file a f	ederal tax return	last year?	\Box Yes \Box No	
If yes, what wa	s your taxable inc	come? (Line 15 or	n the IRS Form 1040)	\$
If no, place "0"	on the line above	Э.		
Section B: Number of hou	sehold members,	including yourse	lf:	
Did your paren	t(s) file a federal	tax return last yea	ur? □ Yes □ No	
If yes, what wa	s your family's ta	xable income? (L	ine 15 on the IRS Form	1040) \$
If no, place "0"	on the line above	е.		
Are you eligible for fina	ancial aid?	□ Ye	s 🗆 No	
If yes, what type?	□ Pell grant	□ Loan	□ Other (describe):	
III. Underrepresented	i –			
Ethnicity:				
□ Hispanic/Latino (Hispanic/Latino refers t origin, regardless of race	to Cuban, Mexicar	er 1, Puerto Rican, S	outh or Central America	n, or other Spanish culture or
Race:				
□ American Indian or A	laska Native	□ Asian	□ Black or African An	nerican
□ Hispanic or Latino		□ White	□ Native Hawaiian or	other Pacific Islander
□ Other response (descr	ribe):			

C. Academic Information

Did you transfer from a community college? □ Yes □ No Do not answer yes, if you were in an early college program.	
First enrollment date at previous higher education institution:	
First enrollment date at Fayetteville State University State:	
Major: Minor:	
Enrolled in a dual degree program? \Box Yes \Box No If yes, list program:	
Year: \Box Sophomore \Box Junior \Box Senior Date degree expected:/20	
Would you consider yourself a nontraditional student (e.g., work full time, are financially independent children or dependents other than your spouse, are a single parent, and/or did not continue your immediately after high school)? \Box Yes \Box No	
Will you be classified as a Junior by May of the current academic year? \Box Yes \Box No	
Total credit hours completed as of today's date:	
Grade Point Average (GPA) in Major: Overall GPA:	
Expected field of graduate study:	
Do you want to earn a Ph.D. or Ed.D.? □ Yes □ No	
Which academic program degree do you intend to pursue after completing your Bachelor's Degree: Ph.D./Ed.D M.D./Ph.D. J.D. Masters	_
Please list the course grades you have received in your major:	

Course # & title	Grade	Course # & title	Grade

Do you already have a bachelor's degree? Yes No

Please name two references and their contact information below. However, it is the applicant's responsibility to make sure that the McNair office receives reference letters. At least one letter should come from a faculty member who knows your academic and/or research work.

Name	Department/office	Phone	
Name	Department/office	Phone	
Briefly indicate your specific experience	ce in independent research, lab	experience and/or indepe	ndent study:
Please list any academic honors and/or	award(s) received (include date	e received):	_
Briefly state your educational and care	er goals:		
			_
D. Additional Information			
Briefly indicate your involvement in ex study, internships, co-ops, volunteer, co			programs, work-
Are you enrolled in the Honors Program			
Can you speak/write/read a language or	ther than English, (if so, list)? _		

□ Student Support Services (SSS)	□ Upward Bound	 Educational Opportunity Centers (EOC)
□ Veteran's Upward Bound	 Educational Talent Search (ETS) 	□ Upward Bound Math & Science
□ GEAR UP	McNair Scholars Program	Early College Program
□ SSS-STEM & Health Sciences	□ U-RISE	 Scientific Research Preparatory Mentoring Program
□ Other (describe):		

Please indicate if you are participating or have previously participated in any of the following programs:

IV. Additional documents required to complete application:

- Include a copy of a signed US 1040 (pages 1-2 only) or Puerto Rico Income Tax Return Form for yourself if you are classified as an independent student; if you are a dependent student, submit your parents' tax form.
- Include official transcripts if you transferred from another institution and unofficial FSU transcripts. Transcripts from transfer institutions must be official and include GPA.
- Attach a personal statement (2 pp. max). Please see application instructions on the website for more details on how to complete this essay.
- Two sealed and completed recommendation forms (available online). These forms must come from faculty members, preferably in your major, and one recommender must have a doctoral degree.
- Submit these documents to FSU McNair Scholars Program, Lyons Science Annex, Room 224B.

Please review your application and sign below:

By signing this application, you agree that all of the information on this application is true and accurate to the best of your knowledge. You also agree to allow Fayetteville State University to solicit further information as needed from various offices and departments both on and off campus. This information will be kept confidential and will only be used as part of selection, membership, and alumni purposes for Fayetteville State's McNair Post-Baccalaureate Achievement Program.

Signature of applicant

Date

Director

Date