

**Delaware State University**  
**Ronald E. McNair Post-Baccalaureate**  
**Achievement Program Application**  
**2005 - 2006**



Please return your completed application form along with required materials to:  
**McNair Scholars Research Program Office**  
**Cottage # 502 - Office 14**  
**(Sponsored Programs Modular)**  
**Delaware State University - Dover, DE**

**PERSONAL INFORMATION**

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

**PART I:**

Name \_\_\_\_\_  
Last First Middle

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

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

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

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

DSU/ E-Mail Address \_\_\_\_\_ Alternative E-mail \_\_\_\_\_

Local Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Alternate Telephone Number (friends/family/home) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex: Female \_\_\_\_\_ Male \_\_\_\_\_  
Month Day Year

Place of Birth \_\_\_\_\_ SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
City State Zip Code



*Ronald E. McNair Post-Baccalaureate Achievement Program, is a Federally funded TRIO program sponsored by the U.S. Department Of Education*

**Ronald E. McNair Post-Baccalaureate Achievement Program**

Are you a U.S. citizen? \_\_\_ Yes \_\_\_ No (If no, please complete the following):  
Country of citizenship \_\_\_\_\_ Type Of Visa \_\_\_\_\_  
Alien Registration # \_\_\_\_\_ Date of Issue \_\_\_\_\_  
Expiration Date \_\_\_\_\_ (Please provide a copy of your alien registration card)

Ethnicity/Race (Optional, will not affect admission decision):  
\_\_\_ African American  
\_\_\_ Asian  
\_\_\_ Caucasian  
\_\_\_ Native American  
\_\_\_ Hispanic/ Latino  
\_\_\_ Other \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_ **Father's Name:** \_\_\_\_\_  
H.S. Bachelors Degree Masters Degree Doctoral H.S. Bachelors Degree Masters Degree Doctoral  
(Circle highest level completed)

Do you live with: Both parents, single parent, grandparent/s, or guardian? (Circle most accurate)

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**PART II:  
ACADEMIC BACKGROUND**

High School attended: \_\_\_\_\_ Overall GPA \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Graduation Date \_\_\_\_\_  
Month Year

**Please list other academic institutions attended below:**

Institution	Attendance Dates	Credits	GPA

Please list your current major: \_\_\_\_\_  
Current GPA Cum GPA

Expected graduation date: \_\_\_\_\_ (month/year)

By the end of May 2006,  
How many credits completed/ earned? \_\_\_\_\_ (Minimum 60 credits hours to participate)

**\* A TRANSCRIPT MUST BE SUBMITTED WITH YOUR APPLICATION \***

**PART III:**

**Please list any Research/ Summer Internship experiences below:**

Date	Location	Type of Research	Supervisor	Telephone #

Please list any computer skills:

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How did you hear about the McNair Program?

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**RONALD E. McNAIR**



Born October 21, 1950 in Lake City, South Carolina. Ronald received a bachelor's degree in physics from North Carolina A&T State University and a Ph.D. in physics from Massachusetts Institute of Technology. McNair and his wife, Cheryl Moore McNair, have two children, Reginald and Joy.

Dr. McNair was selected as an astronaut candidate by NASA in 1978. He first flew as a mission specialist on STS 41-B in 1983, thereby becoming the second African American in space. He logged 191 hours flight time and was responsible for deploying one of the communication satellites for that mission. Dr. McNair was chosen as a mission specialist on Challenger STS 51-L, which was destroyed one minute and 13 seconds after its launch. Ronald E. McNair made the ultimate sacrifice and lost his life in service to the nation and the space program on January 28, 1986 at 35 years of age.

Name \_\_\_\_\_

**RECOMMENDATION  
FORM**

DSU # \_\_\_\_\_

**PART I:  
THIS SECTION TO BE COMPLETED BY APPLICANT**

Name \_\_\_\_\_  
Last First Middle

Delaware State University ID # \_\_\_\_\_ - \_\_\_\_\_

Proposed Graduate Dept./ Program \_\_\_\_\_

Bachelors Degree Sought \_\_\_\_\_

I agree that officials of the Delaware State University shall hold the requested recommendation in confidence, and I hereby waive my rights to examine it.

\_\_\_\_\_ Yes \_\_\_\_\_ No

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**PART II  
TO BE COMPLETED BY RECOMMENDER**

Please explain how long you have known the applicant and in what capacity:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The Delaware State University Ronald E. McNair Post Baccalaureate Achievement Program prepares low-income, first generation, and underrepresented juniors for graduate education through workshops, tutoring, research opportunities, personal counseling, academic counseling, study groups, and GRE preparation. Discuss on the applicant's strengths and academic potential for graduate school. Should you prefer, attach an additional sheet of paper or write the entire statement on letterhead/ stationary.

**Statement:**

Name \_\_\_\_\_

DSU # \_\_\_\_\_

**RECOMMENDATION Cont'd**

SUMMARY EVLUATION	BELOW AVERAGE	AVERAGE	ABOVE AVERAGE	OUTSTANDING	N/A
Research aptitude					
Intellectual potential					
Ability to work with others					
Creativity and imagination					
Maturity					
Self-confidence					
Communication skills; oral					
Communication skills; written					
Motivation for proposed program of study					
Potential as a teacher					
Potential for career advancement					

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Position/ Title

\_\_\_\_\_  
Academic Department

\_\_\_\_\_  
Campus Location/ Address

\_\_\_\_\_  
City, State

\_\_\_\_\_  
Zip Code

***Please return in a sealed envelope - signed across the seal***

**Mail/ Return To:**

**Delaware State University - Cottage 502 (Sponsored Programs Modular)**

**Ronald E. McNair Post-Baccalaureate Achievement Program**

**1200 N. Dupont Hwy, Dover, DE 19901-2277**

**B. FAMILY & VERIFICATION INFORMATION**

All applicants must provide the following information. The information will be used to determine an applicant’s eligibility for the McNair Program and will be held in confidence.

*Last year’s Income Tax Return form **MUST** be submitted along with the application.*

- I. Did you/your parent(s) or guardian(s) file taxes last year? \_\_\_\_\_
- II. How many dependents are listed on the federal income tax return form? \_\_\_\_\_
- III. Place an “**X**” on the appropriate line below indicating **taxable income** (line 37 on form 1040; line 22 on form 1040A and line 5 on form 1040EZ) for last year. (If you have “independent student status”, use your Tax Return forms to provide proof of “Independence” - *you can obtain this from your Student Financial Aid Office.*)

IV. Do you/your family receive assistance from any of the following:

- |  |           |          |
|--|-----------|----------|
| AFDC (Aid to Families with Dependent Children) | _____ Yes | _____ No |
| Social Security                                | _____ Yes | _____ No |
| Veterans’ Benefits                             | _____ Yes | _____ No |
| Food Stamps                                    | _____ Yes | _____ No |
| Unemployment Compensation                      | _____ Yes | _____ No |
| Child Support                                  | _____ Yes | _____ No |

V. Did either you/your parent(s)/ guardian(s) earn a Bachelor’s degree? \_\_\_\_\_ Yes \_\_\_\_\_ No

VI. Are you an Independent Student \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, *attach appropriate documentation*

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Date

### C. ADDITIONAL REQUIREMENTS

#### I. RECOMMENDATIONS

Using the attached forms, provide three (3) letters of recommendation assessing your academic ability, research potential and your motivation and preparation to undertake graduate studies. Two of the letters **must** be from faculty in your major. If you are a former participant in any of the **TRIO** programs (Educational Talent Search, Educational Opportunity Centers, Upward Bound, Upward Bound Math and Science, Veterans and Student Support Services) one (1) recommendation must come from the director/counselor of the program in which you participated. Below, list the names, addresses and telephone numbers of your recommenders.

1. Name \_\_\_\_\_  
Address/ Dept.: \_\_\_\_\_ Phone/ Campus Ext.: \_\_\_\_\_
  
2. Name \_\_\_\_\_  
Address/Dept.: \_\_\_\_\_ Phone/ Campus Ext.: \_\_\_\_\_
  
3. Name \_\_\_\_\_  
Address/Dept.: \_\_\_\_\_ Phone/ Campus Ext.: \_\_\_\_\_

#### II. STATEMENT OF PURPOSE

Please write a Personal Statement of Interest outlining your academic & career goals, research interests, personal strengths, and weaknesses and the reasons you should be selected to participate in the Delaware State University – Ronald E. McNair Post- Baccalaureate Achievement Program. Your essay should not exceed two pages in length (minimum 1000 words).

To the best of my knowledge, the information provided on this application is accurate, complete and true.

Further, I understand that if selected, I am required to participate in the McNair Summer Research Experience from May to mid-July (8-weeks).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

***Thank you for your interest in the McNair Scholars program. Candidates for the program will interview with the McNair Advisory Board. All final decisions will be available no later than February 2006. If you have questions or concerns do not hesitate to contact the McNair Scholars program office at 857-6128 or 6129. You may also contact the program via email at [mcnair.scholars@desu.edu](mailto:mcnair.scholars@desu.edu) or [tconley@desu.edu](mailto:tconley@desu.edu)***

Name \_\_\_\_\_

**FOR OFFICE USE ONLY**

(Circle One) Male or Female

Review Date \_\_\_\_\_

Reviewer \_\_\_\_\_

Title

**QUALIFICATIONS**

- First Generation?
- Low Income?
- Both?
- Underrepresented?
- Overall GPA?
- Major GPA?

**ETHNICITY/RACE**

- African American
- Asian
- Caucasian
- Native American
- Hispanic/ Latino
- Other \_\_\_\_\_

**SELECTION FACTORS AND SCORES**

	BELOW AVERAGE 0-1	AVERAGE 2-4	ABOVE AVERAGE 5-7	OUTSTANDING 8-10
Intellectual potential				
Research aptitude				
Graduate school potential				
Recommendation letters				
Writing ability				
Maturity				
Goal Clarity				
Commitment to Academe				
Communication skill				
Probability of Admission				
Potential to earn Ph.D				
Total Points:				

Comments: \_\_\_\_\_

**ACTION:**

**DATE**

Accept \_\_\_\_\_

\_\_\_\_\_

Alternate \_\_\_\_\_

\_\_\_\_\_

Deny (reason) \_\_\_\_\_

\_\_\_\_\_

Student Response \_\_\_\_\_

Mentor (s) \_\_\_\_\_

\_\_\_\_\_

Reviewer Signature \_\_\_\_\_