

## ***ARE YOU A POTENTIAL E.M.E.R.G.E. SCHOLAR?***

(Engaging McNair Scholars in Excellence, Resilience, and Graduate Education)

The University of Illinois at Urbana-Champaign TRIO Ronald E. McNair Scholars Program is one of the most successful graduate education pipelines in the country. Eligible undergraduate applicants gain research experience, GRE preparation, mentorship, and professional experiences that make them competitive graduate school aspirants. If you are eligible to apply (Citizen or permanent resident of the US, currently enrolled as a full time students at UIUC, junior or senior status, 1<sup>st</sup> generation, low-income, at least 2.85 GPA, and underrepresented minority (American Indian or Alaska Native, Black or African American, Native Hawaiian or Other Pacific Islander), and willing to meet the expectations of the program, proceed to *Page 2* to begin the application process.

*Deliverables and benefits are below:*

### **DELIVERABLES\***

Annual Scholarly Research Papers  
Regular Research Mentor Meetings  
Participation in Graduate School Fairs  
Minimum 5 Grad School Application Submissions  
Annual On-Campus Research Presentations  
Annual On & Off Conference Presentations  
Spring Research Seminar Course Completion  
GRE Preparation  
Summer Research Institute

- Deliverables are subject to change based on programmatic needs

### **BENEFITS**

Enrollment in Graduate Education  
PhD Graduate School Application Waiver  
GRE Fee Reduction Voucher  
Research Mentorship  
Conference Travel  
Training and Exposure to Campus Presentations  
One-On-One Mentoring  
Peer Mentoring  
On-Campus Summer Research Stipend  
Travel Grants

### HOW TO APPLY:

**Read the entire information packet**

**Complete the entire application**

*(Including: Recommendation Form, Interest Essay, Transcript, Tax Documentation, and Financial Assessment & Documentation Form)*

**Contact program staff to schedule interview**

### **Additional Questions?**

Nameka R. Bates, *Assistant Director of McNair*  
610 E. John Street, Suite 130 Student Services Bldg.  
217-265-4962 • [nbates1@illinois.edu](mailto:nbates1@illinois.edu)

*Note: Please do not apply if you cannot participate in ALL program activities. Participation in the 6-week on-campus Summer Research Institute is MANDATORY.*

TRIO Ronald E. McNair Postbaccalaureate Achievement Program is funded by the U.S. Department of Education and the University of Illinois at Urbana-Champaign.



# TRIO

University of Illinois at Urbana-Champaign  
Ronald E. McNair Scholars Program

## McNair Post-Baccalaureate Achievement Program

### Enrollment Application Checklist

Thank you for applying to the TRIO Ronald E. McNair Post-Baccalaureate Achievement Program at the University of Illinois at Urbana-Champaign. Please complete the following prior to submitting your application:

#### Application Requirements:

- Completed Application
- Personal Statement (*Why are you interested in the McNair Scholars Program?*)
- Financial Aid Assessment & Documentation Form
- Copy of Parent(s) Federal Tax Returns
- Letter of Recommendation
- Faculty/Research Mentor Form
- Unofficial Transcript
- Scheduled Interview (*Contact Nameka Bates at [nbates1@illinois.edu](mailto:nbates1@illinois.edu) or 217-265-4962*)

#### FOR FULL CONSIDERATION:

1. Complete all sections of the program application.
2. Identify research mentor and complete *Faculty/Research Mentor Confirmation Form*.
3. Identify instructor, employer, or community partner and complete *Recommendation Form*.
4. Complete top portion of the *Financial Needs Assessment & Documentation Form*
5. Acquire parent(s)/caregivers federal tax returns.
6. Schedule interview with Assistant Director, Nameka Bates.
7. Submit ALL materials (application and supplemental documentation) to McNair office.

**PRIORITY SELECTION DEADLINE IS FRIDAY, SEPTEMBER 30<sup>TH</sup> @ 5:00pm**



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University of Illinois at Urbana-Champaign  
Ronald E. McNair Scholars Program

## McNair Scholars Program Application

### PERSONAL INFORMATION

Last Name		First Name		Middle Name	
Campus Address	Apt	City	State	Zip code	
( ) _____		( ) _____			
Campus Telephone		Cell Phone			
Permanent Home Address		Apt		City	
State		State		Zip code	
( ) _____		_____			
Permanent Home Telephone		University Identification Number (UIN)			
Date of Birth		Sex: MALE <input type="checkbox"/>		FEMALE <input type="checkbox"/>	
School E-mail Address: _____					
Personal/Alternative E-mail Address: _____					

### ELIGIBILITY INFORMATION

Academic Standing:

Freshman    Sophomore    Junior    Senior

Are you a transfer student?    Yes    No

College: \_\_\_\_\_ Department: \_\_\_\_\_

Major: \_\_\_\_\_

# of credits earned to date: \_\_\_\_\_ # of credit currently enrolled: \_\_\_\_\_

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

Expected Graduation Date: \_\_\_\_\_



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University of Illinois at Urbana-Champaign  
Ronald E. McNair Scholars Program

### **ELIGIBILITY INFORMATION Cont.**

First-generation college student:  Yes  No

Ethnic Identification: Are you Hispanic/Latino?  Yes  No

Race (*Check all that apply*):

African American/Black  Native Hawaiian/Pacific Islander

American Indian/Alaskan Native  White/Caucasian

Asian American

Other (specify \_\_\_\_\_)

Citizenship:

- U.S. Citizen (Born or Naturalized)
- U.S. Permanent Resident: Submit a copy if your permanent resident card with this application.
- Adjustment in Status (Submitted application for permanent residency). Submit documentation.

Are you a veteran of the U.S. Armed Forces or currently serving on active duty?  Yes  No

### **FINANCIAL INFORMATION**

For financial aid purposes are you considered:  Dependent  Independent

Are you currently eligible to receive financial aid?  Yes  No

Who claims you as a dependent for tax purposes?  Mother  Father  Yourself

With whom do you live when not at the University?  Mother  Father  Both  Guardians

Are you a homeless individual?  Yes  No

If Dependent Complete Section A; If Independent Complete Section B

#### SECTION A: Parent(s) Tax Information

Total federal **TAXABLE** income: \_\_\_\_\_

*IRS Form 1040 – Line 40*

*IRS Form 1040A – Line 27*

*IRS Form 1040EZ – Line 6*

Number of immediate family members in household, including yourself: \_\_\_\_\_



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University of Illinois at Urbana-Champaign  
Ronald E. McNair Scholars Program

## **FINANCIAL INFORMATION Cont.**

### SECTION B: Applicant's Tax Information

Total federal **TAXABLE** income: \_\_\_\_\_

*IRS Form 1040 – Line 40*

*IRS Form 1040A – Line 27*

*IRS Form 1040EZ – Line 6*

Number of immediate family members in YOUR household, including yourself: \_\_\_\_\_

## **ACADEMIC INFORMATION**

*Are you a participant or alum of any of the following (Check all that apply):*

- |                                |                          |   |                          |
|--------------------------------|--------------------------|---|--------------------------|
| Gear UP                        | <input type="checkbox"/> | President's Award Program (PAP)         | <input type="checkbox"/> |
| Student Support Services (SSS) | <input type="checkbox"/> | Educational Opportunities Program (EOP) | <input type="checkbox"/> |
| Talent Search                  | <input type="checkbox"/> | James Scholar Program                   | <input type="checkbox"/> |
| Upward Bound                   | <input type="checkbox"/> | Illinois Promise                        | <input type="checkbox"/> |
| None                           | <input type="checkbox"/> | Evans Scholar Program                   | <input type="checkbox"/> |

*Membership and participation in academic/campus organizations and activities:*

Activity	Date
_____	_____
_____	_____
_____	_____

Graduate School of Interest (Check all that apply):  Master's  MBA  LAW  MD  PHD

What is your graduate program area of interest: \_\_\_\_\_

Do you understand that McNair only provides services to students who desire a PHD?

- Yes       No



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University of Illinois at Urbana-Champaign  
Ronald E. McNair Scholars Program

## **APPLICANT AGREEMENT**

Please read carefully and sign. By submitting an application for the Ronald E. McNair Post-Baccalaureate Achievement Program at the University of Illinois, I acknowledge the following:

- I understand that I am expected to enroll in graduate school the fall after I graduate from my undergraduate institution and that I am expected to receive a Ph.D. within ten years of receiving my baccalaureate degree.
- I understand that the mission of the program is to prepare participants to be the next generation of scientists, researchers, and professors through rigorous graduate school preparation, academic development, and research training.
- I understand that I am not guaranteed acceptance to the TRIO McNair Scholars Program by virtue of having submitted this application.
- All information on this application is true and correct to the best of my knowledge. Furthermore, I understand that if McNair discovers that I have provided any false information, I am subject to removal from the program.
- I understand that I may need to provide verification of my or my parent(s)' most recent federal taxable income.
- I understand that the McNair stipend will be processed through the Office of Student Financial Aid and will be considered a part of the scholar's total aid package for the academic year which may result in receiving reduced or no stipend depending on financial aid package. Students should speak directly with financial aid for questions.

### **Certification and Form Submission**

**I certify that the information contained within this agreement is, to the best of my knowledge, accurate and complete.**

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



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Ronald E. McNair Scholars Program

## Financial Need Assessment & Documentation Form

### Applicant Only:

I authorize the Office of Financial Aid at the University of Illinois at Urbana-Champaign to release income tax information, need analysis and financial aid information to the Ronald E. McNair Post Baccalaureate Achievement Program at the University of Illinois at Urbana-Champaign.

This information is needed to verify that this student has an income level established by the U.S. Department of Education. This information is essential to the selection process. Your cooperation is appreciated immensely.

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Student Printed Name	Student University Identification Number (UIN)
Student Signature	Date

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### Financial Aid Department:

The official confidential statement at the Financial Aid Office confirms the following information for the student registered above:

- Adjusted gross income: \_\_\_\_\_
- Family Size: \_\_\_\_\_
- Expected Family Contribution: \_\_\_\_\_
- Number of Exemptions: \_\_\_\_\_
- Pell Grant Amount: \_\_\_\_\_

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Printed Name and Position of Financial Aid Official

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Signature of Financial Aid Official	Date
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**PLEASE RETURN THIS FORM TO:**

Ronald E. McNair Post-Baccalaureate Achievement Program  
Office of Minority Student Affairs  
610 E. John Street Suite 130  
Champaign, IL 61820  
Email: [triomcnair@illinois.edu](mailto:triomcnair@illinois.edu)

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Ronald E. McNair Scholars Program

## RECOMMENDATION FORM

This section is to be completed by the applicant. ***Please print and fill.***

\_\_\_\_\_

Last Name                      First                      Middle

I hereby WAIVE my right of access to all letters of recommendation sent to TRIO McNair Program at University of Illinois.

I do NOT waive my right of access to all letters of recommendation sent to TRIO McNair Program at University of Illinois.

*This waiver is not required as a condition for admission to or receipt of any other services and benefits from the Office of Minority Student Affairs.*

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

Signatures: \_\_\_\_\_

**This section is to be completed by the evaluator.** A written letter to accompany this form is encouraged, but not required. Please return directly to the address below or email to Assistant Director at [triomcnair@illinois.edu](mailto:triomcnair@illinois.edu):

Ronald E. McNair Post-Baccalaureate Achievement Program  
Office of Minority Student Affairs  
610 E. John Street, Suite130  
Champaign, IL 61820  
Phone: 217-265-4962

How long have you known the applicant and in what capacity? Give dates if possible.

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

What is your frank appraisal of the applicant's promise as a graduate student and future Scholar?

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





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Ronald E. McNair Scholars Program

In comparing a group of students in the same field who have had approximately the same amount of experience and training, how does the applicant rate in the following areas?

**KEY: Below average (BA) = lowest 40%; Average (A) = middle 20%; Somewhat above average (SAA) = next 15%; Good (G) = next highest 15 %; Outstanding (O) = highest 10%; N/A = Unable to judge**

**BA            A            SAA            G            O            N/A**

Academic aptitude and potential for graduate work.

Present academic performance.

Motivation for the pursuit of advanced graduate study.

Capacity to teach

Ability to follow directions.

Maturity

Meeting Deadlines

Participating in teams

Working Independently

	BA	A	SAA	G	O	N/A
Academic aptitude and potential for graduate work.						
Present academic performance.						
Motivation for the pursuit of advanced graduate study.						
Capacity to teach						
Ability to follow directions.						
Maturity						
Meeting Deadlines						
Participating in teams						
Working Independently						

Signature \_\_\_\_\_ Title \_\_\_\_\_ Institution \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_ Phone \_\_\_\_\_  
(Please type or print)

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Ronald E. McNair Scholars Program

## Faculty/Research Mentor Confirmation or Change Form

\* Please type all information, email to McNair Staff and to faculty mentor, and keep a copy\*

<b>Date Completed</b>	
<b>Scholar's Name</b>	
<b>Scholar's Email</b>	
<b>Scholar's Phone</b>	
<b>Major</b>	
<b>College/School which houses the student's major</b> (e.g., College of Engineering)	
<b>Purpose of the research project</b> (e.g., To investigate factors contributing to academic success of first-generation college students)	
<b>Proposed period of time the student will work on the project</b>	
<b>Faculty/Research mentor's contact information<sup>1</sup></b>  A. Name and exact title/rank B. Office Address C. Email D. Phone	
<b>Mentor's Signature indicating that she or he agrees to the Mentor Responsibilities<sup>2</sup></b>	
<b>Scholar Signature indicating that she or he agrees to the Scholar Responsibilities</b>	

<sup>1</sup> Research mentor includes faculty with earned Ph.D. and graduate student with a research assistantship.

<sup>2</sup> Mentors can also email their approval to OMSA McNair Staff at [triomcnair@illinois.edu](mailto:triomcnair@illinois.edu).

### MENTOR RESPONSIBILITIES<sup>3</sup>

**You have been invited to serve as a Faculty/Research Mentor for the University of Illinois at Urbana-Champaign McNair Scholars Program.** National TRIO Ronald E. McNair Post-Baccalaureate Achievement Programs (McNair Scholars Programs) are designed to prepare students for the professoriate. McNair Programs provide eligible students with academic services and activities geared toward graduate school readiness, intensive research experiences, and doctoral studies. Faculty/Research Mentors play a major role in preparing promising scholars for the rigors of doctoral study, scholarship in general, and the professoriate. The following responsibilities are designed to clarify mentors' roles and to encourage total student success.

1. Provide guidance, assistance, and oversight to mentee to ensure that a minimum of **10 hours of research during the fall and spring semesters** are completed each week.
2. Meet with mentee at least once a month during the fall and spring semesters to: ensure that mentee is making progress on agreed-upon research; discuss strategies for applying to and being accepted into graduate school; and discuss issues related to the professoriate.
3. Assist mentee with identifying opportunities and resources to **present at professional conferences**, and invite mentee to **collaborate on manuscripts** related to the research topic.
4. Supervise mentees in their **completion of a research paper** that adheres to the writing guidelines of your discipline

### SCHOLAR RESPONSIBILITIES

McNair Scholars are expected to enroll in graduate school during the fall semester immediately following graduation and earn a Ph.D. or joint Ph.D. within 10 years of receiving their bachelor's degree. To prepare for this career trajectory, scholars are required to engage in faculty-sponsored research each semester under the following guidelines:

1. Under the direction of the research mentor, scholars will engage in a minimum of **10 hours of research during the fall and spring semesters** each week.
2. Enroll in independent research credit or honors thesis credit under their mentor's guidance.
3. Meet with mentors in person at least once a month, and send them a weekly update of your work through email.
4. **Present at one or more professional conference** during the academic year, and collaborate with mentor on manuscripts related to the research topic.
5. **Complete a research paper** that adheres to the writing guidelines of your discipline. Your paper must be approved by your mentor and submitted to the McNair staff by the end of the spring semester.

If you have any questions or concerns regarding scholar and faculty responsibilities, please contact OMSA McNair staff at [triomcnair@illinois.edu](mailto:triomcnair@illinois.edu)

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<sup>3</sup> Research Assistants may assist in the aforementioned areas and may serve as a co-Faculty/Research Mentor but may not serve as the official Faculty Mentor.