

UNIVERSITY OF MASSACHUSETTS BOSTON

100 Morrissey Blvd  
Boston, MA 02125-3393

# Application for Admission

## Ronald E. McNair Post-Baccalaureate Achievement Program

**TRiO**

RONALD E. McNAIR  
POST-BACCALAUREATE  
ACHIEVEMENT PROGRAM

Funded by a grant from the  
U.S. Department of Education

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Department of Pre-Collegiate Programs  
A Division of Academic Support Services



## ABOUT RONALD E. MCNAIR

Ronald E. McNair graduated from North Carolina A&T State University with honors in physics, and earned a Ph.D. in physics at M.I.T. An expert in laser physics, he was selected by NASA in 1978 for the space shuttle program and was a mission specialist aboard the shuttle flight in 1984. After his death in the Challenger space shuttle accident in 1986, Congress provided funding for the Ronald E. McNair Post-Baccalaureate Achievement Program to encourage students such as you to enroll in graduate studies.

*“Before you can make dreams come true, you must first have one.”*

Ronald E. McNair, Ph.D.

## PROGRAM REQUIREMENTS

### ELIGIBILITY REQUIREMENTS

*In order to be considered for the UMass Boston McNair Program you MUST meet the following three requirements. (Please check all that apply).*

*You must be:*

(1) A citizen or permanent resident of the United States.

AND

(2) A currently enrolled UMass Boston undergraduate planning to apply to graduate school and intending to pursue a doctoral degree.

AND

(3A) A low income and first generation college student (any ethnicity or gender)

OR

(3B) A member of a group underrepresented in post-secondary education: African American/Black; Alaska Native; American Indian; Hawaiian Native or Other Pacific Islander (Guam & U.S. Territories); Hispanic/Latino

*If you have met **all three** of the above eligibility requirements, please complete the application.*

## APPLICATION CHECKLIST

*In order for your application to be processed, the following material must be submitted:*

- A complete application form with appropriate signature(s)
- Two recommendation letters, one of which **MUST** be from a faculty member in your major
- An official copy of your transcript
- A copy of your Student Aid Report (SAR)
- A copy of your federal income tax return (Form: 1040, 1040A, or 1040 EZ) if you are self-supporting or your supporting parent(s)/guardian(s) federal income tax return to document taxable income for the previous calendar year. See income section of this application on page five.

Please note that the following questions are required because this program is federally funded by the Department of Education, and, as such, grants are based upon the population being served. These categories are reported anonymously. The information provided will remain confidential; and any income information you provide will not affect your financial aid status. Please type or print in ink.

**PART I: DEMOGRAPHIC INFORMATION**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Address: \_\_\_\_\_ Apt: \_\_\_\_\_

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

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy) Sex:  Male  Female

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

UMB ID#: UMS \_\_\_\_\_

**PART II: ELIGIBILITY INFORMATION**

**VERIFICATION OF U. S. CITIZENSHIP/ PERMANENT RESIDENT STATUS**

Social Security Number: \_\_\_\_\_

Are you a United States citizen?  Yes  No

If not, what is your country of citizenship? \_\_\_\_\_

If you are not a U.S. citizen, please provide your Alien Registration Number: A\_\_\_\_\_

*If you are an eligible non-citizen, you must provide a copy of front and back of your Alien Registration Card.*

**ETHNICITY AND RACE**

***Please respond to each of the following two questions.***

1) Ethnicity: Are you Hispanic/Latino? Yes No

2) Race (please check all that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> American Indian or Alaska Native          |
| <input type="checkbox"/> Asian                     | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |
| <input type="checkbox"/> White                     |  |

**PARENTS' EDUCATIONAL BACKGROUND**

*Please respond to each of the following two questions.*

With whom do you live?

- Both parents/adoptive parents       Father/adoptive father only       Guardian(s)  
 Mother/adoptive mother only       Other \_\_\_\_\_ (please specify)

With whom did you reside prior to age 18?

- Both parents/adoptive parents       Father/adoptive father only       Guardian(s)  
 Mother/adoptive mother only       Other \_\_\_\_\_ (please specify)

Check the highest education level completed by each parent before **your 18<sup>th</sup> birthday**:

	Elementary School	GED/High School	2 Year College	4 Year College (Received Bachelor's Degree)
Mother/ adoptive Father/ adoptive		<input type="checkbox"/>		

*If your parent(s) graduated from a four-year college, what country was the degree completed in and what degree was received?*

Mother: Country \_\_\_\_\_ Degree \_\_\_\_\_

Father: Country \_\_\_\_\_ Degree \_\_\_\_\_

*If you do not provide a Student Aid Report, you must provide a signed statement from your parent(s) attesting to their highest level of education completed.*

**INCOME INFORMATION**

*Please respond to ONE of the following two questions:*

**(1) If your parent(s) support you**, what was their *taxable income* for the previous calendar year? \$\_\_\_\_\_ (e.g., If you are completing this application in 2009, give their taxable income for 2008.)  
The size of the family unit was \_\_\_\_\_.

**(2) If you are self-supporting**, what was your *taxable income* for the previous calendar year? \$\_\_\_\_\_ (e.g., If you are completing this application in 2009, give your taxable income for 2008.)  
The size of the family unit (including yourself) was \_\_\_\_\_.

*For the purpose of documentation, please attach to your application a copy of the appropriate federal income tax return (Form: 1040, 1040A, or 1040 EZ).*

**PART III: EDUCATIONAL INFORMATION**

What is your major? \_\_\_\_\_ How many credits have you completed? \_\_\_\_\_

Have you applied for financial aid? *(Please check the appropriate box.)*

- I have already applied for financial aid for Fall\_\_\_\_\_.
- I plan to apply for financial aid for Fall \_\_\_\_\_, but have not yet filed my Financial Aid Form.
- I have been made aware of financial aid opportunities and procedures for application, but choose not to apply at this time.

Have you been involved in any research activity?  Yes  No

If yes, please explain

Please state briefly (in about 150 words) your academic goals and how participation in the McNair Program will assist you in achieving these goals. (Use additional paper if necessary.)

**PART IV: CERTIFICATION AND RELEASE OF INFORMATION**

This release form enables the McNair Program at UMass Boston to obtain copies of information regarding admission and financial aid packages and grade reports for the purpose of determining eligibility, developing educational plans, and reporting program statistics. Aspects of this information and the nature of your participation in the McNair Program may be shared with other university personnel in accordance with federal regulations and University policy. You have access to all of your records with the Program, excluding letters of recommendation.

With my signature, I hereby grant permission to the staff of UMass Boston, and specifically the McNair Program, to access my student record and post-secondary records including academic, enrollment, and student aid award information from the college(s)/university(s) I have attended, attend, or will attend.

I understand that all information will be kept confidential and that the information shall only be transferred to a third party outside UMass Boston and the McNair Program on the condition that my written consent is first obtained.

IN ADDITION, I CERTIFY THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS COMPLETE AND ACCURATE.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_  
(only for students under 18)

STAFF USE ONLY	
Date Reviewed: _____	
Date of First Interview: _____	Date of Second Interview: _____
Accepted: _____	
Denied _____	