University of Washington Ronald E. McNair Post-Baccalaureate Achievement Program

Application for the 2019-2020 McNair Scholars Cohort

Due Date: 5:00 pm Friday, February 1st, 2019 (A physical copy of the application must be turned in to the McNair office)

We require the following information for the purposes of our program needs and Dept. of Education grant requirements. Information is kept confidential and secure. If you have any questions or concerns about the information that we are collecting, please contact the McNair office.

Use Adobe Reader to fill out form. After filling out the form, print and sign the copy.

Section 1: Applicant Biographical Information

First Name: Last Name:			
Preferred Name:	Gender Identity: Social Security Number: Alternate email:		
Date of Birth:			
UW email:			
UW Student ID Number:			
Current Address: Street			
City: State:	Zip Code: Phone Number:		
Section 2: Academic Information	n		
Current Year in School:1st Ye	ear (Freshman)3 rd Year (Junior)		
2 nd Y	ear (Sophomore)4 th Year (Senior)		
Are you a Transfer Student:	YesNo		
Expected UW Graduation Date:	Year Quarter		
Intended Major:			
-or- Major :	Additional Major(s)		
Current UW Cumulative GPA:	Major GPA (If enrolled in a major):		
Current Number of UW Credits: _			
Did you attend running start clas	ses?YesNo # of Running start credits		
Section 3: Graduate School Inte	erests		
1) What graduate degree(s) are ye	ou considering?Master'Ph.D. Other		
2) Intended or potential Graduate	Programs/Interests?		
3) When do you plan to apply to	graduate school? Year Quarter		

Section 4: Financial Information

4) Are you climble for financial aid?	Na I	love net ennli	مما	
, , ,		Have not appli		
2) Do your parents (or guardians) claim you as a d	aepenae	nt on their tax	c return?	
Yes No				
3) Based upon your Financial Aid Award letter, and	e you co	nsiaerea:		
Self-Supporting Dependent	. 5.4			
4) Number of dependents from the 2017 Federal T				
5) Annual Taxable Income from the 2017 Federal T			_ 	·
Note: this is not the same as Adjusted Gross Income after deductions are subtracted and is frequently four return. Enter \$0.00 if there is now reported income for	nd on the			
Section 5: Demographics				
Please check all that apply:				
American Indian/ Alaskan Native				
Asian American				
Black / African American				
Latinx / Hispanic				
Native Hawaiian / Native Pacific Islander				
Southeast Asian				
White American				
Other				
Section 6: Parent and/or Guardian Education				
	Mother / Guardian Father / Guardian			
	Yes	No	Yes	No
Have you regularly resided with and received support from parent or guardian?				
2) Has either your mother, father or guardian earned a bachelor's degree?				
3) Indicate the highest level of education achieved by either parent or guardian.				

Section 7: Citizenship

1) Are you a United States citizen? Yes Nο 2) If No, are you a permanent resident? Yes No (Permanent residents must provide a copy of documentation confirming residency.) Section 8: Program Affiliations Please indicate which programs you have been or are affiliated with either at the University of Washington, or at an outside school or college. Select all the apply. ____ TRIO Education Talent Search (ETS) LSAMP ____ TRIO Upward Bound ____ STARS Academy ____ TRIO Upward Bound Math & Science ____ Health Professions Academy (HPA) ____ TRIO Student Support Services ____ STAR-Engineering ____ CAMP ____ GENOM or GENOM-ALVA Early Identification Program (EIP) Educational Opportunity Program (EOP) Other _____ Please tell us how you heard about the McNair Program: Please mail or drop off application packet to: **McNair Scholars Program** University of Washington **Center for Experiential Learning and Diversity** 171 Mary Gates Hall Box 352803 POST-BACCALAUREATE ACHIEVEMENT PROGRAM **Seattle, WA 98195-2803** (Electronic submissions are not accepted.) I Certify that the information provided in this application are true and correct. (Physical signature, in ink, is required). Signature:____ Date: