

*The UC Santa Barbara Edison-McNair Scholarships Program is funded by Edison International.*



**EDISON**  
INTERNATIONAL®



***EDISON-McNAIR  
RESEARCH SCHOLARSHIPS  
2017***

***UNIVERSITY OF CALIFORNIA, SANTA BARBARA***

***Deadline to Apply***

**Applications are accepted throughout the academic year**

***Please complete and return application to:***

*McNair Scholars Program  
Building 477, Room 124  
Santa Barbara, CA 93106-MC2087*

***For more information, please contact:***

*mcnair@mcnair.ucsb.edu  
805-893-3615*

*The information in this application is solely for the purpose of determining the applicant's eligibility for the Edison-McNair Scholarships. Information received is treated confidentially.*

**EDISON-McNAIR RESEARCH SCHOLARSHIPS**  
**University of California, Santa Barbara**

**Eligibility Checklist**

Use the following list to verify that you are eligible to be a Edison-McNair Scholarship.

- ❑ Currently enrolled at UCSB
- ❑ GPA of 3.0 or above
- ❑ Must be a citizen or a permanent resident of the United States\*
- ❑ Engaged in academic research
- ❑ Eligible Majors:
  - Chemical Engineering
  - Chemistry
  - Computer Science
  - Earth Science
  - Electrical Engineering
  - Environmental Studies
  - Mathematics
  - Mechanical Engineering
  - Physics
  - Statistics

*Scholarships are available to a wide range of students among which are women, low-income, first-generation, veterans, and those historically underrepresented in these fields.*

\*Dream Scholars please visit the McNair Scholars Program Office for more information.

If you checked all the boxes, then you are eligible to apply for the Edison-McNair Scholarships. Please return this typed form with your application to:

McNair Scholars Program  
Building 477, Room 124  
Santa Barbara, CA 93106-2087

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**Please read all application directions thoroughly. Application must be typed.**  
Only students whose applications are complete and have adhered to the directions given will be considered for the Edison-McNair Scholarships.

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# EDISON-McNAIR RESEARCH SCHOLARSHIPS

DATE: \_\_\_\_\_

## APPLICANT INFORMATION

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

Current Address \_\_\_\_\_  
City State Zip

Permanent Address \_\_\_\_\_  
City State Zip

Santa Barbara/Local Phone \_\_\_\_\_ Permanent Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Perm # \_\_\_\_\_ Major \_\_\_\_\_ Year \_\_\_\_\_

Last Quarter G.P.A. \_\_\_\_\_ Cumulative G.P.A. \_\_\_\_\_

Expected *quarter* and *year* of **Graduation** \_\_\_\_\_

Citizenship (check one):  U.S. Citizen  Permanent Resident  Other (specify) \_\_\_\_\_

Ethnic Heritage (check all that apply):

- African American  Latino  White  
 Chicano/Mexican-American  Filipino  Asian American  
 Native American  Pacific Islander  Other \_\_\_\_\_ (specify)  
\_\_\_\_\_ (tribe)

## FAMILY INFORMATION

Mother's Highest Grade Completed: \_\_\_\_\_

College Degree Earned (Check all that apply):

- Associate  Bachelor's  Master's  Doctorate  None

Father's Highest Grade Completed: \_\_\_\_\_

College Degree Earned (Check all that apply):

- Associate  Bachelor's  Master's  Doctorate  None

## FAFSA INFORMATION

(You can find on your FAFSA Student Aid Report (SAR) at: <https://fafsa.ed.gov>)

Expected Family Contribution: \_\_\_\_\_

### Staff only

L/I Yes  No

FG Yes  No

URM Yes  No

x \_\_\_\_\_

x \_\_\_\_\_

# ***Statement of Interest***

The statement is required of all students who apply to the Edison-McNair Scholarships. Please provide a summary of your research activities, capstone project, *and/or* plans for graduate study. A thoughtful, well-constructed, and candid response is expected.

*(250 typed words or less)*

# ***Educational Experiences***

If applicable, please list participation in special programs (MESA, STEP, CAMP, UC LEADS, SACNAS, etc.)

*(150 typed words or less)*

Awards, honors, and participation and leadership in academic/campus organizations and activities:

*(150 typed words or less)*

## ***Funds Request***

What type of funding are you requesting? Please check off all that apply.

- Research Support
- Graduate School Applications
- Academic Travel
- Capstone Project Support
- Other *(please describe below)*

# Budget

## 1. RESEARCH SUPPORT /CAPSTONE PROJECT SUPPORT

Participants may use funds to cover select costs associated with research and college/department capstone projects (e.g., lab materials, supplies, human subject's compensation).

Item: \_\_\_\_\_ Cost: \_\_\_\_\_

Item: \_\_\_\_\_ Cost: \_\_\_\_\_

Item: \_\_\_\_\_ Cost: \_\_\_\_\_

Item: \_\_\_\_\_ Cost: \_\_\_\_\_

Item: \_\_\_\_\_ Cost: \_\_\_\_\_

Item: \_\_\_\_\_ Cost: \_\_\_\_\_

TOTAL: \_\_\_\_\_

Please provide a brief statement justifying why you need the items listed on your budget.

*(150 typed words or less)*

2. GRADUATE APPLICATION SUPPORT

Students should list the cost for application fees and graduate school transcripts. **All receipts must be submitted no later than November 13, 2017 to receive a reimbursement.**

Graduate School Name and Program:	Cost of Transcripts:	Application Fees:	Total:
TOTAL COST:			

3. ACADEMIC CONFERENCES AND PRESENTATIONS

Identify *national or regional* professional meetings or conferences that will assist in professional development and networking.

Conference: \_\_\_\_\_

Location: \_\_\_\_\_

Are you presenting a poster or talk at these meetings? \_\_\_\_\_

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

Registration Costs: \_\_\_\_\_ Membership Fee: \_\_\_\_\_

Transportation Costs: \_\_\_\_\_ Hotel Costs: \_\_\_\_\_ Meal Costs: \_\_\_\_\_

Poster Printing Costs: \_\_\_\_\_

TOTAL: \_\_\_\_\_

4. SCHOLARSHIP BUDGET

Based on your estimated costs for the events and activities contained in the budget, please transfer the total costs here.

RESEARCH TOTAL

Research Materials/Capstone Project: \$ \_\_\_\_\_

GRADUATE APPLICATION SUPPORT

Cost of graduate applications: \$ \_\_\_\_\_

ACADEMIC CONFERENCES AND PRESENTATIONS

Anticipated cost of travel: \$ \_\_\_\_\_

**TOTAL EXPENSES REQUESTED (NOT TO EXCEED \$1,000)**

**TOTAL \$ \_\_\_\_\_**



**APPLICANT SIGNATURE**

My signature below indicates that, to the best of my knowledge, the information given in this application is true, complete, and accurate.

I give permission to the McNair Scholars Program Staff to check my UCSB grades in order to determine program eligibility.

Participant Name (PRINT): \_\_\_\_\_

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

**FACULTY MENTOR SIGNATURE**

Faculty Mentor Name (PRINT): \_\_\_\_\_

Faculty Mentor Department: \_\_\_\_\_

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

*Please submit a printed application to:*

McNair Scholars Program  
Building 477, Room 124  
Santa Barbara, CA 93106-MC2087  
Phone: 805-893-3615  
[mcnair@mcnair.ucsb.edu](mailto:mcnair@mcnair.ucsb.edu)

