

# McNAIR SCHOLARS PROGRAM

## EXIT QUESTIONNAIRE

PLEASE TYPE OR PRINT ALL INFORMATION

PLEASE USE ONLY BLACK OR BLUE INK

LAST NAME	FIRST NAME	M.I. OR MAIDEN NAME	SS#
TODAY'S DATE			

### REASON FOR LEAVING THE McNAIR SCHOLARS PROGRAM and / or ECU

Date Left McNair and / or ECU:	
<input type="checkbox"/> <u>Graduated</u> - Provide graduation date:	<input type="checkbox"/> Death in the family:
<input type="checkbox"/> Financial Reasons:	<input type="checkbox"/> Academic Dismissal:
<input type="checkbox"/> Entered Armed Forces:	<input type="checkbox"/> Marriage:
<input type="checkbox"/> Personal Reasons:	<input type="checkbox"/> Health Reasons:
<input type="checkbox"/> Accepted Employment - Employer:	<input type="checkbox"/> Transferred: When: _____ Where:
<input type="checkbox"/> Other. Please specify:	
Did you officially withdraw from the university? <input type="checkbox"/> Yes <input type="checkbox"/> NO	

## GRADUATE SCHOOLS TO WHICH YOU HAVE APPLIED

Please Print

Name of Graduate School	Date Applied	Accepted?		
		Yes	No	?
Academic Department:				
Name of Graduate School	Date Applied	Accepted?		
		Yes	No	?
Academic Department:				
Name of Graduate School	Date Applied	Accepted?		
		Yes	No	?
Academic Department:				
Name of Graduate School	Date Applied	Accepted?		
		Yes	No	?
Academic Department:				
Name of Graduate School	Date Applied	Accepted?		
		Yes	No	?
Academic Department:				
Name of Graduate School	Date Applied	Accepted?		
		Yes	No	?
Academic Department:				

## CONTACT INFORMATION

<p>What is your current LOCAL mailing address?</p> <p>Street Address: _____ _____</p> <p>City: _____</p> <p>State and Zip Code: _____</p>	
<p>What is your PERMANENT mailing address?</p> <p>Street Address: _____ _____</p> <p>City: _____</p> <p>State and Zip Code: _____</p>	
<p>Local Phone: _____</p> <p>Cell Phone: _____</p>	<p>Permanent Phone: _____</p> <p>How is resident related to you? _____</p>
<p>Clearly type or print the e-mail address where you can be most consistently reached.</p>   	
<p>Clearly type or print <i>other</i> e-mail addresses you may consistently use.</p>   	

Provide the name, mailing address, phone number and e-mail address of a family member with whom you are frequently in contact.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Provide the name, mailing address, phone number and e-mail address of another family member with whom you are frequently in contact.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Provide the name, mailing address, phone number and e-mail address of a close personal friend with whom you are frequently in contact.

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Provide the name, mailing address, phone number and e-mail address of another close personal friend with whom you are frequently in contact.

Name: .....

Mailing Address:.....  
.....  
.....  
.....

Phone Number: .....

E-Mail Address: .....

Provide the name, mailing address, phone number and e-mail address of one academic or professional mentor.

Name: .....

Mailing Address: .....

.....

.....

.....

Phone Number: .....

E-Mail Address: .....

Please provide any additional information that may assist the McNair Scholars Program in monitoring and tracking your academic progress in graduate school until the time you achieve a doctorate.

I understand that U.S. Department of Education regulations governing the administration of the McNair Scholars Program requires that McNair staff members monitor and track my academic progress until the time I achieve a doctorate. In order to locate me or to collect current contact information about me, I give the McNair Scholars Program permission to contact the individuals listed on this Exit Questionnaire and to contact any school to which I have applied to confirm my current enrollment status. I promise do my best to remain in touch with the McNair Scholars Program to keep the program up-to-date about my current academic status and about my current contact information each academic year.

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SIGNITURE

DATE

RR - 06.05