



The Ronald E. McNair Scholars Program
(Post-Baccalaureate Achievement Program)
Central Washington University

Request for AND Report of Graduate School Visit

Student: _____

University to be visited: _____

Visit Date: _____

Primary contact concerning this visit and means of contact (in person, telephone, email, department staff contact only etc.):

Specific questions you have prepared to ask this professor or department:

How is your mentor assisting you in the preparation for this visit?

Please attach Travel Funding Request

I understand that once the McNair Scholars Program incurs expenses for this trip on my behalf, I am required to complete the graduate school visit as planned. If I change my mind, cancel my attendance or do not show up, I understand that I am fully responsible for reimbursing the McNair Scholars Program for the incurred expenses. I understand that a hold will be placed on my account until payment arrangements have been made and/or the amount has been repaid in full.

Sign

REPORT of Graduate School Visit (use back side if necessary for any answers):

Name: _____

School: _____

Dates of Visit: _____ to _____

The travel plans you made were: adequate inadequate Why? What could be improved?

You met with and talked to: _____

Other University personnel with whom you met:

Were the majority of your questions answered in full? (Circle one) Yes No

Which questions were unanswered or partially answered?:

Since returning from your visit, have you identified new questions?

What would you do differently if you could make the visit again (area of focus, questions asked, etc)?

Please continue on the reverse side

How will this experience affect how you plan Graduate School visits in the future?

Were you able to debrief with your mentor? (Circle one) Yes No

Were you able to meet with the McNair administration at this institution (if applicable)?
(Circle one) Yes No

If yes, with whom did you meet with?
