



MILESTONE REPORT

(Please return this form to the McNair Office (D145) upon completion.)

COMPLETION OF FIRST DRAFT OF MANUSCRIPT

Research Topic: _____

McNair Scholar: _____

McNair Mentor: _____ Date: _____

Comments: _____

FOR OFFICE USE ONLY:

Date of Confirmation in McNair Office: _____

_____ Phone

_____ Email

_____ In Person

PLEASE ALLOW 6-8 WEEKS FOLLOWING CONFIRMATION FOR PROCESSING.

RISING ABOVE AND BEYOND

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