



**MILESTONE REPORT**

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

**PRESENTATION IN A PROFESSIONAL VENUE**

\*\*\*Mentor initials indicate review and approval of the material for presentation. Please update the form as the Scholar completes presentation requirements. The corresponding stipend will be processed once he/she gives both an oral and poster presentation.

Scholar's name: \_\_\_\_\_

Presentation(s)	Description of Event(s)	Date(s)	Mentor's Initials
1) <input type="checkbox"/> Oral <input type="checkbox"/> Poster	_____	_____	_____
2) <input type="checkbox"/> Oral <input type="checkbox"/> Poster	_____	_____	_____
3) <input type="checkbox"/> Oral <input type="checkbox"/> Poster	_____	_____	_____
4) <input type="checkbox"/> Oral <input type="checkbox"/> Poster	_____	_____	_____
5) <input type="checkbox"/> Oral <input type="checkbox"/> Poster	_____	_____	_____

\*\*\*Each Scholar must present in both oral and poster format to receive the full stipend for presentation.

**FOR OFFICE USE ONLY:**

Date of Confirmation in McNair Office: \_\_\_\_\_

PLEASE ALLOW 6-8 WEEKS FOLLOWING CONFIRMATION FOR PROCESSING.

*RISING ABOVE AND BEYOND*