



Cleveland State University  
**McNair Scholars Program**  
**RESEARCH ACTION PLAN**

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

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

1. Research Topic:
  
2. Summary of Research Project:
  
3. Scholar's research responsibilities:
  
4. Academic and special skills needed:
  
5. Research work schedule:
  
6. Comments/Special needs/Suggestions:

\_\_\_\_\_  
Faculty Mentor Signature

\_\_\_\_\_  
McNair Scholar Signature