The Solcher Family Scholarship
2020-2021 – Checklist

*Note: Scholarship applications must be complete upon submission. Incomplete applications will not be accepted.*

- The completed application form. (Page 4)
- A letter of application. (Directions on Page 4)
- A list of activities, honors, and awards or résumé. (Directions on Page 4)
- **Current Texas Tech Students**: Recommendation Form (Page 5) filled out by a Texas Tech University faculty member or academic advisor within your college.
  
  **Incoming Freshman**: Recommendation Form (Page 5) filled out by a high school teacher, coach, or guidance counselor.

Application is Complete (SDS Staff Initial or Signature): __________________________
The Solcher Family Scholarship
2020-2021

The Solcher Family Scholarship is awarded annually to a student(s) with a hearing impairment.

Scholarship Award

The Solcher Family Scholarship is awarded annually; aid will be awarded for the Fall and Spring semesters as long as they continue to be enrolled in courses at Texas Tech University during that academic year. It should also be noted that the amounts are subject to change depending on funding. The number of scholarships awarded each semester is also subject to change depending on funding.

Application Criteria

Applicants for the Solcher Family Scholarship must be students currently enrolled at Texas Tech University. Applicants must also be currently registered with the Student Disability Services office with a documented hearing impairment.

Application

To apply for the Solcher Family Scholarship, students must submit the following:

- The completed application form.
- A letter of application, separate essays are required for each Student Disability Services scholarship application. **Duplicate essays will not be considered.**
- A list of activities, honors, and awards or résumé.
- **Current Texas Tech Students:** Recommendation Form filled out by a Texas Tech University faculty member or academic advisor within your college.
  - **Incoming Freshman:** Recommendation Form filled out by a high school teacher, coach, or guidance counselor.
- Please do not include pictures or any additional material not specified on the application.

Scholarship Selection Criteria

Scholarship recipients will be selected on the basis of the applicant’s progress toward their educational goals and their score according to the scholarship grading rubric.

Scholarship Selection Committee

Representatives from the Student Disability Services Office comprise the scholarship selection committee. (See Scholarship Committee Charge)

Application Deadline

**Completed** applications must be submitted to the Student Disability Services Office (335 West Hall) by 5:00pm on Wednesday, April 1, 2020.

If unable to submit in person, please mail to the following:
Student Disability Services
Attn: Erika Valencia
335 West Hall – Box 45007
Lubbock, TX 79409

Scholarship application packet must be postmarked by 5:00pm on Wednesday, April 1, 2020.

Questions about the scholarship should be directed to Erika Valencia at 806-742-2405 or erika.valencia@ttu.edu.

Notification of Scholarship Awards

Notification mails will be sent to all applicants via Texas Tech email by April 22, 2020. Scholarship recipients are required to mail a thank you letter to the Solcher Family via the Student Disability Services office by May 3, 2020 in order to be awarded the scholarship.
The Solcher Family Scholarship
2020-2021 Application

**Basic Information**

Full name: ___________________________ R#: _____________________________

Campus/local address: ______________________________________________________

Campus/local phone: ___________________ Email: _____________________________

Permanent address: _________________________________________________________

Parent/guardian name(s): ___________________________________________________

**Academic Information**

Academic major(s): _________________________________________________________

Academic minor(s): _________________________________________________________

Current Cumulative/Adjusted GPA: ___________________GPA Last Semester: ___________

Anticipated Graduation Date: ___________________ Credit Hours Earned: ______

**Letter of Application**

With your application please provide responses to the following prompts in the form of a typed letter addressed to the “scholarship selection committee”.

- As a student with a hearing impairment at Texas Tech, discuss how you have handled your impairment in your college career and how you have worked to be successful in college despite the fact that materials may not always be fully accessible.
- Describe your major educational goals for the next three-year period and describe your progress and plans toward reaching your goals.
- What is the academic skill area in which you need the most improvement? What specific steps do you plan to take to achieve improvement of this skill?
- What is your greatest academic skill area, and how do you plan to utilize that skill to achieve your goals?

**Activities, Honors & Awards**

Please include with your application a typed list (or your résumé) including the following:

- Any honors or awards you have received.
- High school/college activities.
- Leadership positions held.
- Community/volunteer activities.

**Verification of Information/Academic Release**

My signature below verifies that the information contained in this application is correct to the best of my knowledge. To be considered for the Solcher Family Scholarship, I authorize Texas Tech University to release my academic records to the members of the scholarship selection committee.

**I verify this application has been completed solely by me, the student named above.**

Signature: ___________________________ Date: ___________________________
The Solcher Family Scholarship
2020-2021 Recommendation Form

Recommendation for: ________________________________  R#: ____________________
(Full Name)

The above-named student is applying for the Solcher Family Scholarship at Texas Tech University. Scholarship recipients must have a documented hearing impairment. Scholarship recipients will be selected on the basis of the applicant’s progress toward their educational goals and their score according to the scholarship grading rubric.

How long have you known this student? ____________  In what capacity? ____________

Please evaluate the above-named student as compared to other students of similar age. (Please (X) one box in each row)

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<th>Excellent</th>
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Below, please provide your candid evaluation of this student’s progress toward their educational goals.

Print your name: ________________  Signature: ________________  Date: ________

Your current title: ________________________________  Your phone number: ________________

Your address: ____________________________________________  (Zip Code)

Please put this completed reference in a sealed envelope with the student’s name on the front and your signature across the seal. Return the sealed envelope to the student for submission with the student’s application.

Thank you!