Thank you for your interest in applying for our scholarship. Please read directions carefully. Only incoming 9th-12th grade students interested in attending one of TTU UIL Academics programs may apply.

Submit **only the required recommendation letters**; one parent letter and one additional letter of recommendation. Any other letters will be removed before applications are submitted to the scholarship committee. We will not contact applicants to inform them of missing portions. **Incomplete applications will not be considered.** Applicants may apply for a scholarship assistance in only one TTU UIL summer camp. Scholarship recipients are selected by a committee made up of UIL coordinators and staff.

Applications must be emailed to UIL@ttu.edu or postmarked by June 15th, 2019.

Applicants will be notified the week of June 22nd, 2019.

**CHECKLIST**

A complete application will include:

- Program Application Form
- 1 Page Student Essay
- Parent/Guardian Letter of Support
- Additional Recommendation Letter (recommender may not be related to the student)

**Scholarship awards are based upon financial need, academic merit, or both.**

Indicate which camp you are applying for

<table>
<thead>
<tr>
<th>Program</th>
<th>Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>One Act Play/Theater</td>
<td>July 7-20, 2019</td>
</tr>
<tr>
<td>Congress/Speech/Debate</td>
<td>July 7-13, 2019</td>
</tr>
<tr>
<td>Math/Science UIL</td>
<td>July 9-13, 2019</td>
</tr>
</tbody>
</table>

For questions regarding the scholarship application, please call 806-742-2350 or email UIL@ttu.edu

**Mail completed applications to**

TTU UIL Academics  
Box 45035  
Lubbock, TX. 79409

Received by Initials: ___________  Received Date: ___________  
(For Office Use Only)
APPLICATION

Student's First and Last Name _____________________________________________

D.O.B. ________________

Sex of Student _________

Student’s Age _________

Fall 2019 Grade Level __________________________

Home Address City State Zip

________________________________________

School Student attends

________________________________________

Parent /Guardian 1 Cell Phone

________________________________________

Parent /Guardian 2 Cell Phone

________________________________________

Email address

Currently in G/T, AP, or D/C class? □ YES □ NO
If yes, select all that apply:
□ G/T=Gifted & Talented □ AP=Advanced Placement □ DC=Dual Credit □ AVID □ Upward Bound
□ Other _________________________________

The range of scholarships awarded varies. Please specify the **minimum** amount your child can receive and still attend summer camp. $___________

To the best of my knowledge, the information reported on this application form is correct.

Signature of Parent or Guardian: ____________________________ Date _________

Printed Name of Parent or Guardian: ____________________________ Date _________

If your student is offered a scholarship amount, you will need to accept the award, fill out the online application, and place a **non-refundable** $25 deposit to reserve your spot.
STUDENT ESSAY

Respond to the following question below or in an attached typed document.
Why do you want to attend summer camp and how would receiving a scholarship make a difference in your life?
PARENT/ GUARDIAN LETTER OF SUPPORT

Respond to the following question below or in an attached typed document. What would you like us to know about your child and how does this scholarship help them and your family?
**ADDITIONAL RECOMMENDATION** (To be submitted by educator, mentor, community member, or other adult not related to the student).

Respond to the following question below or in an attached typed document.

What characteristics does the student possess and how would this summer camp benefit their educational success?