Alex C. Watkins Memorial Scholarship
2019-2020 – 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 Alex C. Watkins Memorial Scholarship is awarded annually to a student(s) who demonstrates financial need and is registered with Student Disability Services.

Scholarship Award

The Alex C. Watkins Memorial 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.

Applicant Criteria

Applicants for the Alex C. Watkins Memorial Scholarship must be students currently enrolled at Texas Tech University. Applicants must also be currently registered with the Student Disabilities Office. Financial need must be demonstrated or elaborated upon in students’ letter of application or essay.

Application

To apply for the Alex C. Watkins Memorial 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 their score according to the scholarship grading rubric. Financial need will be a consideration.

Scholarship Selection Committee

The scholarship selection committee will consist of the Student Disability Services staff, along with staff members from the Office of the Dean of Students and the Office of Financial Aid. (See Scholarship Committee Charge)

Application Deadline

Completed applications must be submitted to the Student Disability Services Office (335 West Hall) by 5:00pm on Friday, April 5, 2019.

If unable to submit in person, please mail to the following:
Scholarship application packet must be postmarked by 5:00pm on Friday, April 5, 2019.

Questions about the scholarship should be directed to Blayne Alaniz at 806-742-2405 or blayne.alaniz@ttu.edu.

**Notification of Scholarship Awards**

Notification emails will be sent to all applicants via Texas Tech email by April 22, 2019. Scholarship recipients are required to mail a thank you letter to the Watkins and Askew Family **via the Student Disability Services Office by May 3, 2019 in order to be awarded the scholarship.**
Alex C. Watkins Memorial Scholarship
2019-2020 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”.

- Why are you applying for this scholarship, and how would you use it?
- Describe a challenge you have faced in your academic pursuits, and explain how you were able to overcome this challenge.
- Share three accomplishments you are most proud of.
- Describe your major educational goals for the next three years, and describe your progress and plans for attaining these 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 Alex C. Watkins Memorial 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 above-named student is applying for the Alex C. Watkins Memorial Scholarship at Texas Tech University. The Alex C. Watkins Memorial Scholarship is awarded annually to students with documented learning disabilities and/or attention deficit disorders. 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>
<th>Above average</th>
<th>Average</th>
<th>Below average</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!