# Tech Transfer Acceleration Program Fall 2011 TTAP Application

### HOW TO APPLY

## Application Deadline: May 2, 2011

Application and all supporting documents must be received by May 2, 2011 to be considered for acceptance for the Fall 2011 term.

This application form in PDF format is designed for you to print, fill it out by hand and then mail to the TTAP office. Please note that this application cannot be sent electronically. Faxed applications will not be accepted.

#### Complete admission application must include:

- \_ Application Form
- Copy of high school transcript reflecting at least six semesters of work completed, a grade point average computed on an unweighted 4.0 scale, and a rank in class. \*\*
- \_ Official copies of your ACT and/or SAT scores. \*\*
- \_ Essay questions\*\*
- \_ Teacher Recommendation Form \*\*
- \_ Copy of TTU Denial Letter

\*\* Not required if item was submitted with original application to TTU.

Applications will not be reviewed until all required documents have been received.

Please mail materials to:

Texas Tech University Tech Transfer Acceleration Program Box #45020 Lubbock, TX 79409-5020



# TEXAS TECH UNIVERSITY Support Operations for Academic Retention

APPI	LICANT		
Legal Name	First	Middle	,
Social Security Number	F 1151	Mitale	
-	O Esmala		
Birth Date// Age Q Male	O Female		
Mailing Address	City St	ate Zip Co	de
Phone Number () Student's E-Mai	l Address		
You must answer the questions below. If you answer "yes	s", please attach a statement	of explanation.	
Have you ever been convicted of a misdemeanour, f	elony, or other crime?	O No O Yes	
Have you ever been found responsible for a disciplin from 9 <sup>th</sup> grade to the present, whether related to acad your probation, suspension, removal, dismissal, or e	lemic misconduct or behaviora	al misconduct, which r	
Did either of your parents graduate from a 4 year un	iversity?	O No	) Yes
PARENT AND PERMANEN	T ADDRESS INFORM	ATION	
This information is for d		- ]	
With whom do you make your permanent home?       Q P         Parent 1:       Q Mother Q Father Q Unknown	arent 1 O Parent 2 O Both Is Parent 1 living? O	n 🔾 Legal Guardian Yes 🔾 No	QOth
Name	First	Middle	
Home Phone ()	City Cell Phone ()	State	Zip
E-mail address Did Parent 1 complete a college degree? O Yes O No	Type of degree (circle one):	Associates Bachelo	r Masta
Parent 2: O Mother O Father O Unknown	Is Parent 2 living?		i wiaster
Name			
Last Address:	First	Middle	
Home Phone ()	City Cell Phone ()	State	1
E-mail address			



#### **HIGH SCHOOL EDUCATION**

Last High School Attended		
High School Address	City State	
Dates of Attendance (MO/YR) / to /		
Date of High School Graduation (mo/yr)/	Early Graduate?	O Yes O No
GPA on a 4.0, 5.0, 100 point scale. ( <i>Please indicate whice</i> Rank in Class Class Size For		
Counselor's Name		
E-Mail Address Phone (	) Fax (	)
List any other secondary schools you have attended:		
School Name Address	Date	es Attended
School Name Address	/t	es Attended o/ o/
	t.	o/
	tu	o/
STUDENT TEST S	tα tα SCORES Γ (mo/yr)/ SAT (r	o/ o/ mo/yr)/
STUDENT TEST S         Indicate when you completed the college entrance exam(s):	/	o/ o/ mo/yr)/ Composite
STUDENT TEST S         Indicate when you completed the college entrance exam(s):       ACT         ACT Scores:       English       Math	/	o/ o/ mo/yr)/ Composite

All students must be TSI (Texas Success Initiative) Compliant in Reading and Writing prior to TTAP Student Orientation. Students are not required to meet compliance in Math due to the offering of Developmental Math courses through TTAP. Students that do not meet TSI compliance based on SAT/ACT or TAKS scores must take a TSI Placement Exam in order to become compliant. To view exam details, please visit the following link: <u>Texas Success Initiative Overview</u>



#### TEXAS TECH UNIVERSITY Support Operations for Academic Retention

#### **COLLEGE EDUCATION/ SUMMER GATEWAY**

**Previous College Credit:** Please list all college courses that you have taken and have received college credit. Include college(s) where course work was completed through correspondence, extension, or through the post-secondary options.

Send official transcripts from each college attended to South Plains College AND Texas Tech University.

Dates of Attendance	College/University	City, State, and Zip	Course Taken/Grade
/ to / / to / / to / / to /			

Summer Gateway Program Participants: I have been accepted to the Summer Gateway Program and plan to apply to

TTAP as a secondary option. \_\_\_\_Yes \_\_\_\_ No

Community College Attended for Summer Gateway:

City, State, and Zip Code: \_\_\_\_\_

Courses Taken:

\*Initial participation in Gateway or previous college credit will not affect your acceptance into TTAP. However, in the case

that you are taking/have taken college credit courses that coincide with TTAP courses, participation in TTAP may not be

beneficial for the student. Each applicant will be reviewed on a case-by-case basis to assure the best possible option is made available to the applicant.

#### ADDITIONAL INFORMATION

If there is any additional information you would like to provide regarding special circumstances or additional qualifications that you feel would enhance your application, please do so on a separate sheet of paper. You must put your full name, date of birth, and name of secondary school on each sheet of paper.

#### **ESSAY INSTRUCTIONS**

Did you submit an essay with your initial application to Texas Tech? Yes O No O

If you answered yes, you do not need to submit another essay for TTAP.

If you answered no, you will be required to Submit a 500 word ESSAY. Answer one of the following;

- 1. Describe a time in your life when you used leadership and organizational skills to reach a goal. What was the goal? What was the process of accomplishing that goal and how would you apply those skills to being a successful college student.
- 2. Describe your biggest challenges in high school. How did you overcome them and how will they prepare you for college.



TEXAS TECH UNIVERSITY Support Operations for Academic Retention

#### **TEACHER RECOMMENDATION FORM**

# \* Note: Student's who submitted a recommendation letter with their original application to TTU, are not required to submit the Teacher Recommendation Form.

**If you did not submit a recommendation letter, complete** the top portion of the Teacher Recommendation form. The recommendation form should be complete by a previous high school teacher or college professor. Friends, family members, etc. cannot serve as a recommender for the applicant.

As a courtesy, our recommendation is to include a stamped envelope addressed to:

Texas Tech University Tech Transfer Acceleration Program Box 5020 Lubbock, TX, 79409-5020.

#### **APPLICATION CHECKLIST**

Before you send your application, please refer to this checklist to ensure your application is complete.

#### **Complete admission application must include:**

- \_ Application Form
- Copy of your high school transcript reflecting at least six semesters of work completed, a grade point average computed on an unweighted 4.0 scale, and a rank in class. \*\*
- Official copies of your act and/or sat scores \*\*
- Essay Response to Question \*\*
- Teacher Recommendation Form \*\*
- \_ Copy of TTU Denial Letter

\*\* Not required if item was submitted with original application to TTU.

#### **APPLICANT SIGNATURE**

• I hereby certify to the best of my knowledge that the information furnished on this application is true and complete. I understand that if found to be otherwise, it is sufficient cause for delay of admission, loss of credit, rejection, or dismissal. I hereby consent to the release of my transcript(s) to Tech Transfer Acceleration Program and Texas Tech University.

#### APPLICANT'S SIGNATURE \_

DATE \_

	Teacher Recomme	endation Forr	n
<b>Student Information:</b> Students please fill out only your conta	ct information below		
Applicant's Name:La	st	First	Middle
Applicant's Telephone:			
I waive my right to	ever see this form and	any supplement	ary notes or letters.
Signatur	e		Date
	Please do not fill out in	formation below	
The person named above is applying for aa appreciate having your appraisal of the ap Thank you for your assistance.			
Name:Last		First	
Last		First	
Last	Em	First	O more than one year
Last Contact Phone:	Em licant? Oless that	First	O more than one year
Last Contact Phone: How long have you known the app How well do you know the applicat	Em licant? Oless that nt? O casually	First ail: o one year Q fairly well	O more than one year
Name:	Em licant? Oless that nt? O casually	First ail: o one year Q fairly well	O more than one year O very well
Last Contact Phone: How long have you known the app How well do you know the applicat	Em licant? Oless that nt? O casually he applicant?	First ail: n one year O fairly well	O more than one year O very well
Last Contact Phone: How long have you known the applicat How well do you know the applicat In what capacity have you known the On a scale of 1 to 10, please rate th	Em licant? Qless that nt? Qless that o casually he applicant? e applicant on the charac	First ail: n one year O fairly well	O more than one year O very well
Last Contact Phone: How long have you known the app How well do you know the applicat In what capacity have you known th On a scale of 1 to 10, please rate th a. Capacity for analytical thinkin b. Accepts responsibility	Em licant? Qless that nt? Qless that o casually he applicant? e applicant on the charac	First ail: n one year Q fairly well teristics shown be	O more than one year O very well
Last Contact Phone: How long have you known the app How well do you know the applicat In what capacity have you known the  On a scale of 1 to 10, please rate th a. Capacity for analytical thinkin b. Accepts responsibility c. Motivation and enthusiasm d. Organizational ability	Em licant? Qless that nt? Qless that of casually he applicant?	First ail: n one year O fairly well teristics shown be 1-10	O more than one year O very well
Last Contact Phone: How long have you known the appli- How well do you know the applicat In what capacity have you known the On a scale of 1 to 10, please rate th a. Capacity for analytical thinkin b. Accepts responsibility c. Motivation and enthusiasm d. Organizational ability e. Ability to work with colleague f. Ability to handle stressful situ	Em licant? Qless that nt? Qcasually he applicant? e applicant on the charac	First ail: n one year O fairly well teristics shown be 1-10	O more than one year O very well
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Last Contact Phone: How long have you known the applicat How well do you know the applicat In what capacity have you known th On a scale of 1 to 10, please rate th a. Capacity for analytical thinkin b. Accepts responsibility c. Motivation and enthusiasm d. Organizational ability e. Ability to work with colleague f. Ability to handle stressful situ	Em Licant? Qless than nt? Qless than nt? Qless than the applicant? e applicant on the charace ations effectively	First ail: n one year Q fairly well teristics shown be 1-10	O more than one year O very well



TEXAS TECH UNIVERSITY Support Operations for Academic Retention

Write a few sentences describing the applicant's chances of successfully completing the program of study. Statements about the candidate's academic maturity and stability, character and integrity, and interpersonal effectiveness are particularly important for persons applying to TTAP.

If you alone were making the decision to accept this applicant, which of the following would best describe your decision?

- Q Recruit will be a truly outstanding student and professional
- Q Definitely accept will complete the degree at a superior level
- Q Accept will complete the program at a superior level
- Q Accept with reservations about the ability or motivation
- O Accept with reservations
- O Do not accept (please explain below)

Other Comments:

The application will not be reviewed until all recommendations are received.

**Thank you for your assistance.** Please return this form in the envelope provided to:

> Texas Tech University Tech Transfer Acceleration Program Box #45020 Lubbock, TX 79409-5020