



P.O. Box 17373

website: [www.elcincodemayo.org](http://www.elcincodemayo.org)

Colorado Springs, CO 80935-7373

*El Cinco de Mayo, Inc. Scholarship*  
**INSTRUCTIONS FOR 2024-2025 SCHOLARSHIP APPLICATION**  
*Illegible or incomplete information will disqualify your application.*

**1. Requirements to qualify for the El Cinco de Mayo, Inc. Scholarship**

- a. **Must** fall within the definition of “underserved” (someone who does not have the financial resources and/or has inadequate support, guidance, assistance and/or would be the first in their family to attend/graduate from college; and/or who is facing adversity in life due to their socio-economic situation)
- b. **Must be a Resident** of El Paso County in Colorado
- c. Have a cumulative grade point average of **3.0** or better
- d. Be an Undergraduate or Graduate Student attending **full time**
- e. *If selected as a finalist*, must be available to participate in personal interview (date to be announced)
- f. *If selected as a recipient*, **must** provide a head shot photo for journal and website, or as needed
- g. *If selected as a recipient*, **must** provide update on academic year’s progress (at end of year)
- h. *If selected as a recipient*, **must** volunteer with El Cinco de Mayo Inc. for a minimum of 10 hours for the academic year they are selected
- i. *If selected as a recipient*, **must** attend **2 MANDATORY** Recognition events (to be announced).

**2. Application must be submitted by mail and meet deadline date**

Collate into **SETS**, 4 copies and the ORIGINAL for each of the following (total of 5 SETS):

- a. Scholarship Application
- b. Personal Essay. **MUST** include **background information/culture/future goals & aspirations** (must be typed, 12 pt. font – ½” margins and limit to one page, single spaced)
- c. 1 Page Personal Resume (should include school activities, community service, sports activities, and employment, if applicable (employment, most current only)
- d. 2 Letters of Recommendation (must be different from previously submitted, if applicable)
- e. Exception: 1 (one) **official** transcript, in a sealed envelope from institution - (no copies needed) **and include in application packet. Do not mail separately from application packet. The institution may also email transcript to [elcincocos@gmail.com](mailto:elcincocos@gmail.com)**
- f. Must be postmarked no later than midnight on **Monday, June 3, 2024**.

**3. Mail to:**

El Cinco de Mayo, Inc.  
**ATTN: Scholarship Committee**  
P.O. Box 17373  
Colorado Springs, CO 80935-7373

For questions, please contact us at:  
[elcincocos@gmail.com](mailto:elcincocos@gmail.com)

**Scholarship package includes for your use:**

- Page 1 Instructions
- Page 2 Check off list.
- Page 3 & 4 Application.



*El Cinco de Mayo, Inc. Scholarship*  
**2024-2025 Scholarship Application Check-Off List**

Please use the list below to check off items as you have completed them for your application packet. Please collate into **completed application sets, NOT individual item sets.** (There are 5 committee members and packets must be ready to disburse to each member). **Incomplete applications will not be considered.**

1.  1 official Transcript - from Institution (see Exception 2 e on page 1)
2.  Application - 4 copies plus original (5 total)
3.  Personal essay - 4 copies plus original (5 total)
4.  One-page Resume - 4 copies plus original (5 total)
5.  Two Letters of Recommendation - 4 copies plus original (5 total)

**Incomplete information will disqualify your application.**

Mail to: El Cinco de Mayo, Inc. – Scholarship Committee – PO Box 17373 – Colorado Springs, CO 80935-7373. **Must be postmarked no later than midnight Monday, June 3, 2024**

**Requirements:**

Applicant agrees to fill out a survey provided by El Cinco de Mayo, Inc., scholarship committee, at the end of the 2024-2025 academic year to update Committee on progress made by student.

Applicant agrees to provide a head shot photo for advertising in journal, website, etc., if selected.

Applicant agrees to volunteer with El Cinco de Mayo Inc., for a minimum of 10 hours for the academic year they are selected as recipients.

Applicant agrees to be recognized publicly as a scholarship recipient through print or media, by El Cinco de Mayo, Inc.

Applicant agrees to attend **two MANDATORY** Annual El Cinco de Mayo, Inc., Scholarship Recognition events - July 30, 2024 and (May 2025 to be determined). Details of both events to be announced. **Please do not apply for a scholarship if you cannot commit to these requirements.**

Applicant agrees to notify El Cinco de Mayo, Inc., **immediately following any changes to recipient's full-time student status** as indicated on student's application. Failure to do so could result in payment of scholarship back to El Cinco de Mayo, Inc.

Upon agreement to these requirements, the recipient must sign an Acceptance/Agreement form.



*El Cinco de Mayo, Inc. Scholarship*  
**Application 2024-2025**

**PERSONAL**

Name: \_\_\_\_\_  
*Last First MI*

College/University  
Student I.D. # (if applicable) \_\_\_\_\_

Home/Mailing Address: \_\_\_\_\_  
*Street City State Zip*

Telephone #: \_\_\_\_\_  
**(both numbers are required)** *Cell # Another phone #*

Email Address: \_\_\_\_\_

El Paso County Resident \_\_\_\_\_  
*Yes No*

**EDUCATION**

Current **Cumulative** GPA: \_\_\_\_\_ Major: \_\_\_\_\_

Attending School: \_\_\_\_\_  
*Full Time Part Time*

College Status: \_\_\_\_\_  
*Freshman Sophomore Junior Senior*

Name of Institution you are (or will be) attending: \_\_\_\_\_

\_\_\_\_\_  
*Name Telephone #*

\_\_\_\_\_  
*Address City State Zip*

High School Graduated from, or GED \_\_\_\_\_

\_\_\_\_\_  
*Dates Attended Graduation Date City/State*



## EMPLOYMENT HISTORY:

Current Employer:

Name	Address	Dates
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### OTHER:

Have you received an El Cinco de Mayo, Inc., Scholarship in the past? *(Not a factor for receiving one this year – informational only)*

Yes \_\_\_\_ No \_\_\_\_ If yes – year(s) awarded: \_\_\_\_\_

Do you agree to be recognized publicly through print or media, by El Cinco de Mayo, Inc., as a scholarship recipient?

Yes  No

Do you agree to attend and be recognized at the **MANDATORY** Annual Cinco de Mayo, Inc., Scholarship Recognition events? Dates and details of both events to be announced.

Yes  No

Do you agree to submit a “**head shot only**” photo if selected?

Yes  No

Do you agree to volunteer with El Cinco de Mayo Inc., for a minimum of 10 hours for the academic year you are selected as a recipient?

Yes  No

Do you agree to provide an update on academic progress at the end of the 2024-2025 academic year?

Yes  No

Do you agree to notify El Cinco de Mayo, Inc., **immediately** if any changes occur related to your **full-time** student status?

Yes  No

Family Income: \_\_\_\_Below \$40,000 \_\_\_\_\$40,001-\$55,000 \_\_\_\_\$55,001-\$70,000 \_\_\_\_Above \$70,001

**Scholarships are awarded by check made out to the institution with the student’s name in the memo portion. Checks must be taken to and deposited by the College/University, NOT the student’s personal accounts.**

*Failure to comply with these requirements could disqualify you from further consideration of Scholarship Awards and/or require payment of scholarship back to El Cinco de Mayo, Inc., from recipient.*

If selected as a recipient, further contact information on your parent(s) or spouse may be requested if recipient would like to invite them to the Scholarship Recognition events (optional).

Failure to comply with the requirements listed above could result in forfeiture of your scholarship and/or payment of scholarship back to El Cinco de Mayo, Inc.

**By signing below, you agree to these terms.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date