



El Cinco de Mayo Inc. P.O. Box 17373

Colorado Springs, CO 80935-7373

Email: [elcincocos@gmail.com](mailto:elcincocos@gmail.com) | Phone: (719) 459-7760

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

## *\*Robert L. "Bob" Armendariz Scholarship*

### INSTRUCTIONS FOR 2025-2026 SCHOLARSHIP APPLICATION

*Illegible or incomplete information will disqualify your application.*

#### **Requirements to qualify for the Robert L. "Bob" Armendariz Scholarship**

1. **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).
2. **Must** Plan to (or currently) attend a higher education institution within the **State of Colorado**
3. Have a cumulative grade point average of 2.8 or better (or explanation if lower)
4. Be a **full-time** Undergraduate or Graduate Student
5. *If selected as a finalist*, must be available to participate in personal interview, (date to be announced)
6. *If selected as a recipient*, must provide a headshot photo for journal, website, and advertising
7. *If selected as a recipient*, must provide update on academic year's progress
8. *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.
9. *If selected as a recipient*, must attend 2 MANDATORY Recognition events (May 3 , 2025 and July 29 2025).

**Completed application will be accepted until March 3, 2025 11:59 p.m.**

#### **Completed scholarship application will include:**

1. Scholarship Application
2. Personal essay that includes ( max. 1 pg., 12 pt., single spaced):
  - Statement/background about your story, cultural background, and how that has helped mold you and your future goals that you have set (include future goals).
  - How important is your cultural background, and why?
  - Indicate what "honor and commitment" mean to you.
3. Current resume that includes: school activities, awards, community service, sports activities, and employment
4. Two (2) current letters of recommendation (must be different from previously submitted, if applicable)
5. Official transcripts sent to [elcincocos@gmail.com](mailto:elcincocos@gmail.com) (order asap-may take up to two weeks)
  - Must be postmarked no later than midnight on **Monday, March 3, 2025. Plan ahead!**

#### **3. Mail to:**

El Cinco de Mayo, Inc.

ATTN: Scholarship Committee

P.O. Box 17373

Colorado Springs, CO 80935-7373

Scan and email completed application and all required documents [elcincocos@gmail.com](mailto:elcincocos@gmail.com)

\_\_\_\_\_ I have checked off and ensured that all documents are added to my application.



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*Robert L. "Bob" Armendariz Scholarship*  
**2025-2026 Scholarship Application Check-Off List**

Please use the list below to check off items as you have completed them for your application packet.

1.  Transcript-*Official* Sealed (**included in application packet or institution may email to [elcincocos@gmail.com](mailto:elcincocos@gmail.com)**)
2.  Completed application
3.  Personal essay (requirements under instructions)
4.  One-page current resume
5.  Two current letters of recommendation

***Incomplete information will disqualify your application.***

Mail to: "El Cinco de Mayo, Inc., PO Box 17373 – Colorado Springs, CO 80935-7373".

**Must be postmarked no later than midnight Monday, March 3, 2025. Plan ahead! Transcripts may take up to 2 weeks or more to process.**

**Reminders:**

Applicant agrees to fill out a survey provided by El Cinco de Mayo, Inc., scholarship committee, at the end of the 2025-2026 academic year to update Committee on progress made by student;

Applicant agrees to provide photo (**headshot only**) for journal and website, 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 recipient;

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

Applicant agrees to attend 2 **MANDATORY** Annual Cinco de Mayo recognition events (May 3, 2025 and July 29, 2025). Details to be announced.

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 repayment of scholarship to El Cinco de Mayo, Inc.,



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## *Robert L. "Bob" Armendariz Scholarship* **2025-2026 Scholarship Application**

### PERSONAL

Name:

\_\_\_\_\_  
*Last* *First* *MI*

College/University

Student I.D. # (if applicable)

Home/Mailing Address:

\_\_\_\_\_  
*Street*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*Zip*

Telephone #:

**(both are required)**

Email Address:

\_\_\_\_\_  
*Cell #*

\_\_\_\_\_  
*Another phone #*

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*

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Graduation Date*

\_\_\_\_\_  
*(City/State)*

### EMPLOYMENT HISTORY:



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Current Employer:

Name	Address	Dates
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**OTHER** (this is not the only contributing factor):

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 cannot be deposited into a student's personal account and must be taken to and deposited by the College/University.

Have you received a Robert L. "Bob" Armendariz 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 2 mandatory annual Recognition events (May 3 and July 29, 2025).

Yes  No

Do you agree to submit a photo (headshot only) 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 2025-2026 academic year?

Yes  No

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

Yes  No

*Failure to comply with these requirements could result in forfeiture of your scholarship, disqualify you from further consideration of scholarship awards and/or repayment of scholarship award to El Cinco de Mayo, Inc.*

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 events (optional).

By signing below, I agree to these terms.

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

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

\_\_\_\_\_  
*Date*