

COMMUNITIES CINCO DE MAYO

P.O. Box 155038 Lufkin, TX 75915-5038 Phone: (936) 632-8444

Non-Traditional SCHOLARSHIP APPLICATION Deadline - March 28, 2025

Last Name______ First Name______ MI_____

I. APPLICANT'S PERSONAL INFORMATION

ity	State		Zip Code	
hone/Cell:	Email:			
I. FINANCIAL INFORMATIO	N			
Independent Student	or		Dependent Student	
f yes, number of dependents you claimed			Total number of dependents that your parent or guardian claimed	
you currently employed?		Full	Full or Part time?	
nd/or your information, if inde	•		ross Income of parents living at hor	
o \$0 - \$9,999		0	\$75,000-\$99,999	
o \$10,000-\$24,999		0	\$100,000-\$149,000	
o \$25,000-\$49,999		0	\$150,000-\$200,000	
o \$50,000-\$74,999		0	\$200,000+	
Jumber in College (including s	elf)			
Theck all that apply and fill out	information reg	garding	g Pell Grant:	
	or full or pa	rtial	Pell. Amount <u>\$</u>	
Have applied and qualified f				
Have applied and qualified for the Have applied and did not qu	alify.			
• • • •	•	st estim	nate	
Have applied and did not qu	•	st estim	nate	

III. COLLEGE-TECHNICAL SCHOOL Name of College/Technical School attending _____ Classification for 2024-2025: College Freshman ☐ College Sophomore ☐ College Junior ☐ Graduate Student ☐ College Senior Other-Technical First Choice Major ______ Second Choice Major _____ Degree Type: Certificate Program _____ Associates 2 yrs. ____ BA ____ BS ____ Other____ Brief statement on possible career choices after college **Scholarships** Please list all scholarships or other financial aid for which you have received formal notification to date. Include scholarships you will receive through your parent's employment. Scholarship Source _____ Amount ____ Scholarship Source Amount IV. OTHER REQUIRED DOCUMENTS Essay Requirements: Times New Roman, 12-point font, minimum of 2 pages double-spaced Describe yourself and reasons why you qualify for this scholarship. In the process, discuss your strengths, influences, personal characteristics, accomplishments, and goals. This is an opportunity for the selection committee to get to know more about you. **Letters of Recommendations** Two letters of recommendation; may be by a non-relative, employer, church member, teacher, etc. Letters need to be mailed to Communities Cinco de Mayo, P.O. Box 155038, Lufkin, TX 75915-5038 **Transcript** Copy of most recent unofficial transcript ALL SECTIONS OF APPLICATION MUST BE COMPLETE TO BE CONSIDERED DO NOT LEAVE ANY SECTION BLANK STUDENT/PARENT AGREEMENT The signatures below certify that all information contained in this application is accurate and factual. I agree to provide the scholarship donor with the address of my university's financial aid office and proof of enrollment. Parent and or guardian signature required if student is a dependent. Deadline to claim scholarship is year from date of scholarship award. The application and all documents must be mailed to Communities Cinco de Mayo. Do not email application

Applicant's Signature ______ Date: _____

Parent/Guardian Signature ______ Date: _____