## TO ALL EL PASO AREA HIGH SCHOOL STUDENTS, HIGHER EDUCATION STUDENTS, SCHOOL COUNSELORS, AND INTERESTED CANDIDATES:

The El Paso Hispanic Chamber of Commerce Education Foundation, in keeping with its tradition of serving the community, offers a scholarship program: a fund for El Paso region students seeking consideration, whether applying for new admission or currently enrolled in an accredited program. Awards are granted without regard to race, color, creed, sex, religion, disability, or national origin.

Please distribute this letter along with the enclosed scholarship application to all interested students and school counselors. The application may be reproduced as necessary. Students must complete the attached application and include a copy of the high school transcript, complete FAFSA report, and ACT or SAT score. Applications are evaluated on the information supplied; therefore, all questions must be answered completely. **Incomplete applications will not be evaluated. The deadline for submitting the application is March 13, 2026.** Applicants to the EPHCC Education Foundation Scholarship Fund must meet the following criteria.

- ➤ Be a student who will earn a high school diploma no earlier than May 2026; and
- Enroll in a full-time undergraduate course of study at an accredited two- or four-year college or university in the fall of 2026.
- > Or be currently enrolled to an accredited program, in good standing.
- > GPA must be 3.0 and above to qualify.
- > Total family income less than \$50,000.00.

Scholarship recipients are selected on a number of criteria, including academic record, potential to succeed, leadership and participation in community activities, honors, and work experience, a statement of educational and career goals. Financial need as calculated by EPHCC Education Foundation must be demonstrated for the student to receive an award.

The Scholarship Committee of the EPHCC Education Foundation makes the selection of scholarship recipients. All recipients will be notified by May 1, 2026.

Acceptance of the scholarship constitutes permission for EPHCC Education Foundation to use recipients' names, biographical information, pictures for publicity purposes, and **agreement to attend a scholarship award ceremony** at the Foundations expense, if such a ceremony is held.

EPHCC Education Foundation reserves the right to interpret and review the conditions and procedures of this scholarship program and to make changes at any time including termination of the program.

Questions regarding the scholarship program should be addressed to:

EPHCC Education Foundation Scholarship Committee

## EL PASO HISPANIC CHAMBER OF COMMERCE EDUCATION FOUNDATION SCHOLARSHIP APPLICATION

Submit your complete paper application to:
4141 Pinnacle St, Ste 120
El Paso, Texas 79902-1017
Phone: (915) 566-4066

or

Submit your complete electronic application to: beck6841@gmail.com

### This application must be submitted by March 13, 2026.

NOTE: Students who are currently High School Seniors and current College Freshmen and Sophomores in good standing are eligible to receive the El Paso Hispanic Chamber of Commerce Education Foundation Scholarship.

PLEASE TYPE OR PRINT A	LL INFORMATION				
NAME:					
Last		First	ľ	Middle	
HOMEADDRESS:					
Stro	eet	City/State		Zip Code	
HOME PHONE:	CELL PI	HONE:	EMA	AIL:	
SEX () Male () Female DA	TE OF BIRTH	SOC	IAL SECURITY 1	NUMBER	
AUTHORIZATION TO REL	EASE INFORMATION				
the EPHCC Educatio 2. I hereby () do () do no	not authorize my high scho on Foundation of authorize the EPHCC Edu potential sources of scholar	acation Foundation		-	
Applicant's Signature		Da	ate		
COUNSELOR CERTIFICA	ATION				
COUNSELOR'S NAME		SCHOOL PHONE			
HIGH SCHOOL NAME & A	DDRESS				
Street		City/State		Zip C	ode
High School GPA:(GPA must be 3.0 or above t		ing ]	Math	Critical Reading	
I hereby certify that the submitted in this applicat		and summary	of school activ	vities and awards.	/honors as
Counselor's Signature			— De	ıte.	

# AN OFFICIAL HIGH SCHOOL TRANSCRIPT MUST BE SUBMITTED WITH THIS APPLICATION

### COLLEGE PREFERENCE

NAME OF UNIVERSITY/COLLEGE	DATE APPLIED	DATE ACCEPTED
I plan to pursue a degree in		
Please enclose a copy of the letter of accept	ance from the University/Colleg	ge.
HONORS, AWARDS, AND SCHOLARSHIPS		
Please list the honors, awards, scholarships, and grants	you have received. For scholarships or g	rants, identify type and amount.
1	Date Received	Amount
2. Description		-
-	Date Received	Amount
3. Description	Date Received	Amount
ACTIVITIES		
Please list in order of importance/interest participated such as athletics, music, and club		
1)Activity		
		Dates
2) Activity	Hours/Weeks	Dates
3) Activity	Hours/Weeks	Dates
I certify that the information on this application is conformation to be released to the donor or potential of authorize the publication of any award I might receive.	orrect to the best of my knowledge. I held to the best of my knowledge. I held to the best of my knowledge. I held to the best of my knowledge.	nereby give permission for this
Applicant's signature:	Date:	

### **CAREER GOALS**

Vrite a brief narrative describing your educational goals and objectives.
After I graduate from high school I would like to
Attach additional page if more space is required)
FINANCIAL STATUS Total family income MUST BE LESS THAN \$50,000 yearly)
This section must be completed by parent or guardian (or applicant if self supporting). If the ection is not completed, it will be assumed that no financial need exists.
Please use the latest figures available as reported to the IRS. (Attach FAFSA report)
1. For year 20, total family income was \$, and taxable was \$
Signature of Parent/Guardian (or applicant if self supporting)  Date
APPLICATION MAY RE REPRODUCED AS REQUIRED

#### APPLICATION MAY BE REPRODUCED AS REQUIRED

We thank you for your participation in the EPHCC Education Foundation and wish you success in all your future endeavors.