

Hobbs Hispano Chamber of Commerce Foundation 2026 Scholarship Application

(Please Type or Print only)



(Application must be received by HHCCF by **April 1, 2026**)

NOTE TO STUDENT: The legibility, accuracy and completeness of application will be considered.

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

E-mail: _____

High School: _____ Proposed field of study: _____

OBJECTIVE

The Hobbs Hispano Chamber of Commerce Foundation Scholarship Program recognizes graduation high school seniors for their educational, leadership and community service qualities. We award scholarships to those graduating seniors that want to continue their education at an institution of higher learning. Our Scholarship Committee will consider educational achievement, leadership qualities, letters of recommendation, written essay, community involvement and financial need.

ELIGIBILITY

The candidate must be a senior graduating in the current school year and planning to enroll in an institution of higher education in the fall semester of 2025-2026 academic year. The student must have a minimum of 2.5 cumulative GPA.

ESSAY

Develop a 350 to 400 word, typed essay on the following theme: "***The Importance of Obtaining a College Education (According to Me)***"

REFERENCE/RECOMMENDATIONS

Provide two letters of recommendation using the attached forms. Recommendations from relatives are not acceptable. You are required to have at least one educator's recommendation (teacher, counselor or principal). Have each writer to seal the letter in an envelope prior to returning it to you. Return them with your application.

OFFICIAL TRANSCRIPT

Applicants must have the school registrar complete the enclosed Registrar Form. In addition, include the most recent official transcript through the last completed semester.

PERSONAL DATA

List school activities, including leadership positions held.

List of civic and/or community involvement activities.

List honors and/or school or community awards.

Please attach additional sheets if needed.

DEADLINE IS: April 1, 2026

SUBMIT YOUR COMPLETE SCHOLARSHIP APPLICATION PACKAGE TO:

Hobbs Hispano Chamber of Commerce Foundation

ATTN: Scholarship Committee

P. O. Box 721

Hobbs, New Mexico 88241-721

Or drop off the complete package to:

Hobbs Hispano Chamber of Commerce

113 North Shipp Street

Hobbs, New Mexico 88240

Monday through Thursday – 8:30 am to 5:30 pm (Lunch hour 12:00 to 1:00 pm)

Friday – 8:30 am to 12:30 pm

EDUCATOR

Letter of Recommendation
(Please Type or Print)

Name of Student _____

Relationship to Student _____

How long have you known this student? _____

1. Discuss why you believe this individual should be awarded a Hobbs Hispano Chamber of Commerce Foundation Scholarship.

2. Please discuss your impression of the following for this student: Academic achievement, Leadership and Civic/Community Involvement.

(Please attach additional sheets if needed)

Reference information (Please print)

Name _____

Address _____

Phone Number _____

Signature _____

Upon completion, please insert in a sealed envelope and return it to applicant.

**Letter of Recommendation
For Second Reference
(Please Type or Print)**

Name of Student _____

Relationship to Student _____

How long have you known this student? _____

1. Discuss why you believe this individual should be awarded a Hobbs Hispano Chamber of Commerce Foundation Scholarship.

2. Please discuss your impression of the following for this student: Academic achievement, Leadership and Civic/Community Involvement.

(Please attach additional sheets if needed)

Reference information (Please print)

Name _____

Address _____

Phone Number _____

Signature _____

Upon completion, please insert in a sealed envelope and return it to applicant.

REGISTRAR FORM

THIS SECTION MUST BE COMPLETED BY YOUR SCHOOL REGISTRAR

NOTE: An official sealed copy of the student's transcript should be included with this application.

Name of High School _____

Address _____

School Phone Number _____

Student Name _____

Expected Graduation Date _____

Cumulative Grade Point Average _____

Signature and Seal of Registrar _____

Official Title _____ Date _____

Comments:

Hobbs Hispano Chamber of Commerce Foundation Application Checklist

Before submitting your application, review and check the following points to ensure complete understanding of the scholarship application, deadline and eligibility requirements.

It is the applicant's responsibility to ensure that it complete and all requested materials are submitted. Incomplete applications WILL NOT be considered.

Applicants should submit the application packet in the following order. Check off as completed.

- ___ 1. Completed application form
- ___ 2. Essay
- ___ 3. Official copy of high school transcript
- ___ 4. Letters of recommendation (one from an educator)
- ___ 5. Executed and dated Certification of Application

The Hobbs Hispano Chamber of Commerce must receive all applications no later than **April 1, 2026**. Applications received after the deadline **WILL NOT** be considered.

All scholarship applicants will be notified regarding the scholarship awards directly.

A notification will be communicated to the selected educational institution's financial aid department in early August. Proof of enrollment in a post-secondary institution is necessary to obtain your award. It is the awardee's responsibility to ensure the Hobbs Hispano Chamber of Commerce Foundation receives the official enrollment form from the institution. Scholarship awards are mailed and made payable to the educational institution for the benefit of the student. The HHCCF Scholarship is a non-renewable scholarship.

CERTIFICATION: All of the enclosed information presented in this application is true and complete to the best of my knowledge. I hereby give permission to the Hobbs Hispano Chamber of Commerce Foundation to share this information for the purpose of public relations and/or possible future scholarship applicant recruitment projects. I further certify that I am a graduating high school senior and will be attending a post-secondary institution upon my graduation.

Applicant's Signature

Date

Parent or Guardian Signature