Company/Organization Sponsored Scholarships
Cisco College

Company/Organization Sponsored Scholarship

• The Cisco College Company Sponsored Scholarship program is designed to strengthen partnerships with Businesses and Industries across the Big Country Region in providing scholarship opportunities for students. Businesses, industries, Civic groups, and churches may sponsor students. A scholarship sponsored by one of the aforementioned groups will carry the name of the business/industry, Church or Civic group and be promoted by Cisco College. Scholarship applicants can be attending any program at Cisco College: Academic, Technical or Health Science. Additional information on the Cisco College Company/Organization Scholarship program is located on the College’s website:

https://www.cisco.edu/tuition-financial-aid/scholarship-opportunities

Scholarship Match

• Cisco College will match up to $500 a semester.

• Sponsoring Companies/Organizations may opt to provide an equal or greater sum per semester. If scholarship amount is less than $500 a semester, Cisco College will match the lesser amount.

• Company/Organization is responsible for the selection of the scholarship recipient, completing the Company/Organization information sheet and forwarding the information along with a company check or company credit card to Cisco College by the deadline each semester. (Company/Organization Information sheet)

• The college does not match the Company/Organization Scholarship for dual-credit courses as the tuition is already discounted.

Scholarship Process/Requirements

• Students must be enrolled full-time at Cisco College (Fall/Spring minimum 12 hours/Summer minimum 6 hours)

• Students must complete the Free Application for Federal Student Financial Aid (FAFSA)

(FAFSA Apply Here) https://studentaid.ed.gov/sa/fafsa

Note: Company/Organization scholarship funds may be adjusted in accordance with the student’s FAFSA Estimated Family Contribution (EFC) and the Cost of Education (COE)

• Students must complete the Company/Organization Scholarship form.

• Companies/Organizations must complete their part of the Scholarship Form.

• Applications must be received at least two-weeks prior to the beginning of each semester.

• The Scholarship applicant must meet all Cisco College’s admissions requirements and maintain a 2.0 GPA or greater.

• In the event refunds are due to the student, they are processed at the time 60% of the semester is completed.

• If applicant drops below 12 hours or fails to maintain a 2.0, the applicant will not be eligible for the Company/Organization Scholarship the next long semester.

• Applicants will be notified once Company/Organization has returned their document, check, and all requirements are met.
Cisco College
STUDENT FORM
Company/Organization Scholarship Application

Print the following information:
Name: ____________________________ Date: ____________________________
Date of Birth: ____________________________
Address: ________________________________________________________________
    Street __________________________________ City/State ____________________________
    Zip code __________________________________________________________
Telephone: (home) ____________________________ (cell) ____________________________
E-mail Address: ____________________________
Social Security Number: ____________________________
Student ID# (if you have one): ____________________________
This agreement covers the ____________________________ of the ____________ year.
    Fall/Spring/Summer
______________________________
Signature of Applicant

Please return this page to: Cisco College
    Att: Martha Montgomery
    101 College Heights
    Cisco, Texas  76437

OFFICE USE ONLY:
FASFA COMPLETED  Y or N  AMOUNT OF GRANT(S) AWARDED  ________________
PRIOR ATTENDANCE Y or N  # HOURS COMPETED ________  CUM GPA: ________________
CURRENT # HOURS ENROLLED ________________
Cisco College
Company/Organization Scholarship Application

Print the following information:

Date: _____________________

Company Name: ________________________________________________________________
Address: _______________________________________________________________________
                        Street    City/State    Zip code
Telephone: (home) _______________________________________________________________
Contact Person: __________________________________________________________________
Email: __________________________________________________________________________
Name of Scholarship Recipient: _____________________________________________________
Student ID# of Recipient____________________________________________________________
Term in which scholarship(s) are to be applied:    Fall ______          Spring _____   Summer___
Scholarship Amount:  ______________________________________________________________

Is student allowed to be refunded the remainder of your scholarship if not used?   Y   or   N
If “NO”, please provide the address where you would like the refund to be sent.
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Please return this page with company check to:
Cisco College
Att:  Martha Montgomery
101 College Heights
Cisco, Texas  76437