



SCHOLARSHIP / TOOLSHIP INFORMATION SHEET

NAME OF SCHOLARSHIP: **KIWANIS CLUB OF HYANNIS**

NAME OF TOOLSHIP: **KIWANIS CLUB OF HYANNIS**

AMOUNT OF SCHOLARSHIP: **\$500.00** ONE TIME ANNUALLY
& (Based on continuing eligibility)

AMOUNT OF TOOLSHIP: **\$500.00**

CRITERIA:
MUST RESIDE IN A PARTICULAR TOWN? YES NO IF YES - WHERE? **HYANNIS**

COURSE OF STUDY or SHOP: _____
ACADEMIC: To be considered (for the scholarship)
NEED: To be considered
OTHER: A deserving student

CONTACT INFORMATION:

NAME: Mr. Raymond Dubois
ORGANIZATION: **Kiwanis Club of Hyannis**
ADDRESS: 42 North Road
West Yarmouth, MA 02673

PHONE: 508-775-4725
EMAIL: _____

APPLICATION PROCESS: CCT APPLICATION ORGANIZATION'S OWN APPLICATION

DEADLINE FOR APPLICATION: **March 2**

SELECTION PROCESS: WE SELECT RECIPIENT ORG SELECTS RECIPIENT

METHOD OF DISTRIBUTION: Presented at CCT Awards Assembly (Toolship)
Scholarship check will be paid upon successful completion of first
year and submission of grades.
 1ST SEMESTER GRADES 2ND SEMESTER GRADES