



SCHOLARSHIP / TOOLSHIP INFORMATION SHEET

NAME OF SCHOLARSHIP: N/A

NAME OF TOOLSHIP: NEIGHBORHOOD AUTO TOOLSHIP

AMOUNT OF SCHOLARSHIP: N/A ONE TIME ANNUALLY
(Based on continuing eligibility)

AMOUNT OF TOOLSHIP: \$200.00

CRITERIA:

MUST RESIDE IN A PARTICULAR TOWN? YES NO IF YES - WHERE? _____

COURSE OF STUDY or SHOP: AUTO TECH TOOLSHIP

ACADEMIC: _____
NEED: _____
OTHER: _____

CONTACT INFORMATION:

NAME: Kevin Sturtevant
ORGANIZATION: Neighborhood Auto
ADDRESS: 1500 Route 6
Wellfleet, MA 02667
PHONE: 508-349-9761
EMAIL: _____

APPLICATION PROCESS: CCT APPLICATION ORGANIZATION'S OWN APPLICATION

Mr. Fitzgerald will select the recipient.

DEADLINE FOR APPLICATION: March 2

SELECTION PROCESS: CCT SELECTS RECIPIENT ORG SELECTS RECIPIENT

METHOD OF DISTRIBUTION: Check will be presented to the recipient at Awards Night.

 1ST SEMESTER GRADES 2ND SEMESTER GRADES