



SCHOLARSHIP / TOOLSHIP INFORMATION SHEET

NAME OF SCHOLARSHIP: **SNOW'S HOME & GARDEN SCHOLARSHIP**

NAME OF TOOLSHIP: **N/A**

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

AMOUNT OF TOOLSHIP: **N/A**

CRITERIA:

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

COURSE OF STUDY or SHOP: **HORTICULTURE**

ACADEMIC: To be considered GPA 2.8 or higher

NEED: To be considered *Disqualification based on other assistance
or assets may be considered.

OTHER: Must be enrolled at CCT for at least two (2) years.
Plans to attend an accredited institution for not less than one
year.

CONTACT INFORMATION:

NAME: Mr. Sid Snow, President and General Manager

ORGANIZATION: **Snow's Home & Garden**

ADDRESS: 22 Main Street

Orleans, MA 02653

PHONE: 508-255-0158 ext. 125

EMAIL: sid@snow-hh.com

APPLICATION PROCESS: CCT APPLICATION ORGANIZATION'S OWN APPLICATION

GUIDANCE DEPT. MAY RECOMMEND TOP STUDENT APPLICANT.

**Select a student who is not receiving a significant quantity of
awards unless there is severe financial need.**

DEADLINE FOR APPLICATION: **March 2** Submitted through Guidance / Principal

SELECTION PROCESS: CCT SELECTS RECIPIENT ORG SELECTS RECIPIENT

METHOD OF DISTRIBUTION: Payable to the school upon successful completion of first semester and
entering the second.

1ST SEMESTER GRADES 2ND SEMESTER GRADES