



SCHOLARSHIP / TOOLSHIP INFORMATION SHEET

NAME OF SCHOLARSHIP: **WEST DENNIS GARDEN CLUB**

NAME OF TOOLSHIP: **N/A**

AMOUNT OF SCHOLARSHIP: **\$1,000.00** 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, Conservation, Environment, Oceanography**

Landscaping, Agriculture & related fields.

ACADEMIC: Considered

NEED: Considered

OTHER: Scholarship, Citizenship & Need

CONTACT INFORMATION:

NAME: Patricia Kodiz
ORGANIZATION: **West Dennis Garden Club**
ADDRESS: P.O. Box 943
West Dennis, MA 02670
PHONE: 508-398-9829 or (cell) 617-283-5237
EMAIL: PKodzis@aol.com

APPLICATION PROCESS: CCT APPLICATION ORGANIZATION'S OWN APPLICATION
Submit application.
The West Dennis Garden Club will notified the recipient
in writing along with procedures to be followed.

DEADLINE FOR APPLICATION: **March 2** (CCT must mail applications to West Dennis Garden Club by April 10)

SELECTION PROCESS: WE SELECT RECIPIENT ORG SELECTS RECIPIENT

METHOD OF DISTRIBUTION: Payment will be made directly to the student upon successful completion
of 1st semester and receipt of 2nd semester bill (submit a copy)

1ST SEMESTER GRADES 2ND SEMESTER GRADES