



## **Mike Snow Memorial Basketball Scholarship Guidelines and Application**

The Cromwell Recreation Department is honored to establish the Mike Snow Memorial Basketball Scholarship in memory of Mike Snow, whose life and contributions to the Cromwell community will continue to be remembered and celebrated.

This scholarship is intended to encourage volunteer coaching and community involvement, while providing an opportunity for a Cromwell youth to participate in a Cromwell Recreation youth basketball program who may otherwise face financial barriers to participation.

The scholarship recognizes the qualities that make youth sports meaningful – leadership, community spirit, teamwork, sportsmanship, dedication, and a positive attitude. Through this scholarship, we hope to help keep young people involved in the game of basketball while carrying forward the spirit of community and giving that Mike represented.

### **Scholarship Award**

The Mike Snow Memorial Basketball Scholarship will provide financial assistance toward registration fees for a youth basketball program offered through the Cromwell Recreation Department.

The number and amount of scholarships awarded will be determined based on available funds and the number of qualified applicants.

### **Eligibility**

Applicants must:

- Be a Cromwell resident.
- Be eligible to participate in a Cromwell Recreation youth basketball program.
- Be a parent/guardian, who has applied and been approved, to be a volunteer coach.
- Submit a completed scholarship application by the stated deadline.
- Meet any applicable age or grade requirements for the basketball program.

### **Selection**

Applications will be reviewed by the Cromwell Recreation Department. Consideration may be given to:

- Commitment to coaching and community involvement
- Financial need
- Positive Attitude and fostering development in others.

### **A Lasting Memorial**

The Mike Snow Memorial Basketball Scholarship is more than financial assistance. It is a way to keep Mike's memory alive by giving local youth the opportunity to learn, grow, compete, make friends, and be part of a team.

We are grateful to Mike's family, friends, and all those who have contributed to this scholarship and helped make this opportunity possible.

# Mike Snow Memorial Basketball Scholarship Application

## Cromwell Recreation Department

Application Deadline: November 1, 2026

### Applicant Information

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian (Coaches) Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Has the applicant participated in Cromwell Recreation basketball before?

☐ Yes ☐ No If yes, please list the year(s): \_\_\_\_\_

Has the adult applicant coached Cromwell Recreation basketball before?

☐ Yes ☐ No If yes, please list the year(s): \_\_\_\_\_

Does your household receive any of the following benefits?

- ☐ SNAP
- ☐ Temporary Family Assistance (TFA)
- ☐ Medicaid/HUSKY
- ☐ WIC – Supplemental Nutrition Program
- ☐ Supplemental Security Income (SSI)
- ☐ Housing assistance
- ☐ Free or reduced-price school meals
- ☐ Other: \_\_\_\_\_

What does basketball mean to your child, and why would they like to participate in this program?

\_\_\_\_\_  
\_\_\_\_\_

Please describe any other coaching or community involvement by the adult applicant:

\_\_\_\_\_  
\_\_\_\_\_

## Parent/Guardian Statement

I certify that the information provided on this application is accurate and complete. I understand that scholarship assistance is intended to help eligible Cromwell youth participate in Cromwell Recreation basketball programs and that awards are subject to available funds.

Parent/Guardian Signature: \_\_\_\_\_ Date: November 1, 2026 \_\_\_\_\_

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For Recreation Department Use Only

Application Received: \_\_\_\_\_

Scholarship Awarded: ☐ Yes ☐ No

Amount Awarded: \$ \_\_\_\_\_

Program: \_\_\_\_\_

Reviewed By: \_\_\_\_\_

Date: \_\_\_\_\_

**PLEASE RETURN TO CROMWELL RECREATION DEPARTMENT**  
**41 West Street, Cromwell, CT 06416 ~ 860-632-3467 ~ recreation@cromwellct.gov**