

Date of Application: _____

Shining Light Use Only:

Created: _____

Amount: _____

Check Number: _____

Shining Lightvoided
10/11/05P.O. Box 60602
Lafayette, LA 70598
**EXTRA CURRICULAR ASSISTANCE
SCHOLARSHIP APPLICATION 2005-2006**
Musical Instrument ApplicationAPPLICATION INFORMATION: Applications must be found or postmarked by the 1st of the month. (See Back) All scholarship checks will be made payable to the school and sent by the 15th of each month.
*One child per application please.Casero Heights Elem.
School1100.00
Funding Request

141.00

David Pipkin
School Board EmployeeTeacher
Position096-6171
Phone NumberTierra Sandy
Student who will receive fundingChristine Sun
Parent's Name(337) 996-1572
Parent's phone number5th
Student's GradeMrs. McKinley
Student's TeacherMrs. Anderson
Principal1001 Tee Na Road
School AddressASAP
Date instrument is needed784 E. Armand St. Carencro
Student's Address0% 47th
Parent's Contribution (25%)Clarinet
Instrument child is leasing

\$188 total

Please itemize any other items needed; include cost per item.

1. Clarinet Kit 15
3. reeds 132. _____
4. _____Why does this student qualify for this assistance? FREE LunchMr. Pipkin
School Board Employee Signature[Signature]
Principal SignatureChristine Sun
Parent / Legal Guardian SignatureTierra Sandy
Student Signature

*All information and signatures must be provided for consideration of scholarship. Please Fax to Michelle Izzo at (337) 232-1301 or mail to Michelle Izzo, 1005 E. St. Mary Blvd. Suite 207, Lafayette, LA 70503.

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