

Date of Application: _____

| |
|-------------------------|
| Shining Light Use Only: |
| Granted: _____ |
| Not Granted: _____ |
| Amount: _____ |

#1525

Shining Light



P.O. Box 60602
Lafayette, LA 70596

EXTRA CURRICULAR ASSISTANCE SCHOLARSHIP APPLICATION 2001-2002

APPLICATION INFORMATION: Applications must be postmarked by the 15th of the month. (See Back)

| | |
|-----------------------------------|-----------------|
| J. W. Faulk | \$ 11.00 |
| School | Funding Request |
| Heidi LeBlanc | Teacher |
| School Board Employee | Position |
| 711 E. Willow Laf. LA 70504 | Carol Mays |
| School Address | Principal |
| Amonte Calais | Althea Calais |
| Student that will receive funding | Parent name |

| | | | |
|--|--------|-------|------------------|
| Student address | City | Zip | Phone number |
| Field Trip | Monroe | 70501 | 3/23/06 |
| Title of enrichment activity student will participate in | | | Date of activity |

Area of Interest: Academic Enrichment Cultural Enrichment
 Personal Enrichment

SEN

Describe the enrichment activity the student will participate in.

Field trip to ZOO OF ACADIANA including lunch, alligator show ~~and~~ and train ride and admission
 Why does this student qualify for this assistance? \$11.50

Low Income Family

[Handwritten notes and scribbles]

Heidi LeBlanc Carol A. Mays

School Board Employee Signature Principal Signature
 Althea Calais Amonte Calais

Parent/ Legal Guardian Signature Student Signature

*All scholarship checks will be made payable to the school/ school board employee.