

Date of Application: 9-11-06

Shining Light Use Only:

Granted: _____

Amount: _____

Check Number: _____



Shining Light Foundation

"To provide opportunities so that every child's light will shine"

P.O. Box 60602

Lafayette, LA 70596

EXTRA CURRICULAR ASSISTANCE SCHOLARSHIP APPLICATION 2005-2006 Musical Instrument Application



APPLICATION INFORMATION: Applications must be faxed 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.

J. Wallace James Elementary
School\$120
rental fee - 126.75
Funding RequestErin Gray
School Board EmployeeBand Director
Position234-0461
Phone NumberBriasha Solomon
Student who will receive funding*Briasha Solomon*
Parent's Name706-7783082
Parent's phone number4
Student's GradeErin Gray
Student's TeacherDana Schmeissl
Principal1500 W. Willow St. Scott, 70583
School Address9-15-06
Date instrument is needed*502 Martin Luther King Dr.
Student's Address\$ 40.25
Parent's Contribution (25% of total cost)Clarinet160

Instrument child is leasing

Please itemize any other items needed; include cost per item. Total Cost: \$ _____

1. _____ \$ _____
3. _____ \$ _____2. _____ \$ _____
4. _____ \$ _____Why does this student qualify for this assistance? The family is unable to rent an instrument because of financial reasonsE. M. Gray
School Board Employee SignatureD. Schmeissl
Principal Signature*Briasha Solomon*
Parent / Legal Guardian Signature*Briasha Solomon*
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.