Date of Application: AUG 29 2006

Shining Light Use Only
Granted: _____
Amount: _____
Check Number #1526

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 2006-2007

[redacted] 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 Activity per application please.

Paul Breaux Middle — School
$ 16.00 — Funding Request
Chenette Adler — School Board Employee
Counselor — Position
232-5101 — Phone Number
Kimberly Bruno — Student who will receive funding
Jo Ann Ransomet — Parent's Name
$ — Parent's Contribution
8 — Student's Grade
J. LaFleur — Student's Teacher
237-4496 — Parent's phone number
P.E. — Title of enrichment activity
ALL Year — Date of Activity
1400 S. Orange St, Laf. LA 70501 — School Address
Loritta Caldwell — Principal

Area of Interest: ✓ Academic ____ Cultural ____ Personal Enrichment

Describe the enrichment activity the student will participate in. Please itemize trip expenses.

1. _____ $ _____ 2. _____ $ _____
3. _____ $ _____ 4. _____ $ _____

Why does this student qualify for this assistance? Purchase of the required P.E. uniform is a financial hardship on the family.

Chenette Adler — School Board Employee Signature
Loritta Caldwell — Principal Signature

_____ — Parent / Legal Guardian Signature
_____ — 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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