

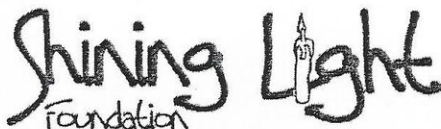
Date of Application: 7-12-2006

Shining Light Use Only:

Granted: 10-9-06

Amount: 50.00

Check Number: 1327



"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
FIELD TRIP 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.

Milton Elem.
School

\$ _____
Funding Request

School Board Employee

Position

Phone Number

Brandon Albert
Student who will receive funding

Dawn Albert
Parent's Name

\$ 2500
Parent's Contribution

4
Student's Grade

Student's Teacher

856-8470
Parent's phone number

Title of enrichment activity

July 31 - Aug 4th
Date of Activity

Milton, LA
School Address

Ms. Kibedeaux
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? _____

School Board Employee Signature

Dawn Albert
Parent / Legal Guardian Signature

Supreme Kibedeaux
Principal Signature

Brandon Albert
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.