

Date of Application: 3/9/07

Shining Light Use Only:
Granted: _____
Amount: _____
Check Number: <u>733</u>



"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
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.**

School Evangeline Elementary Funding Request \$ 25.00

School Board Employee Angy Bonner Position Counselor Phone Number 284-3274

Student who will receive funding Yashira Stevens Parent's Name Monique Rouner Parent's Contribution \$ 0

Student's Grade 2nd Student's Teacher Edett T. Iley Parent's phone number Cell 277-2777
Hk-6677

Title of enrichment activity Field Trip Date of Activity Week - March 19-23

School Address 610 E. Boutchier Swarth Rd
Lafayette LA 70507 Principal Madefaine McNelly

Area of Interest: Academic Cultural Personal Enrichment

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

- | | |
|----------------------------|----------------------------------|
| 1. <u>Bus</u> \$ <u>11</u> | 2. <u>more</u> \$ <u>8.00</u> |
| 3. <u>Gas</u> \$ <u>5</u> | 4. <u>Ice Cream</u> \$ <u>50</u> |

Why does this student qualify for this assistance? Family struggles with abundance of medical bills (Mother's sick)

School Board Employee Signature Angy Bonner Principal Signature X

Parent / Legal Guardian Signature Monique E. Rouner Student Signature Yashira

*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.

(87)