

Date of Application: 8/27/07

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 2007-2008 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.

OSSUN ELEMENTARY
School

\$ 221.25
Funding Request (75% of total cost)

MRS. KELLI CLAUSE
School Board Employee

PRINCIPAL
Position

896-3263
Phone Number

JEREMY HOLIER
Student who will receive funding

Robin Soileau
Parent's Name

234-7215
Parent's phone number

5
Student's Grade

MR. JAMES BALKENHOL
Student's Teacher

MRS. KELLI CLAUSE
Principal

400 RUE SCHOLASTIQUE LAFAYETTE
School Address

70507
Date instrument is needed

112 LeBessue Rd. Lot 42 hof. la. 70507
Student's Address

ALTO SAXOPHONE
Instrument

Please itemize instrument and any other items needed; include cost per item.

1. SAXOPHONE \$ 250.00

2. REED \$ 15.00

3. BOOK \$ 8.00

4. CLEANING KIT \$ 22.00

Total cost of instrument & supplies: \$ 295.00

\$ 73.75
Parent's Contribution (25% of total cost)

Why does this student qualify for this assistance? _____

[Signature]
School Board Employee Signature

[Signature]
Principal Signature

[Signature]
Parent / Legal Guardian Signature

[Signature]
Student Signature

*All information and signatures must be provided for consideration of scholarship. For more information call Michelle Izzo at 337-504-2812. Please Fax application to John Broussard at (337) 984-7535 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.