

Deo

Date of Application: 8/28/07

MR-B 935-6786

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.

Alice Boucher School \$ 174.75 Funding Request (75% of total cost)

MRS. SARORA BILLEAUDEAN School Board Employee Position Principal Phone Number 337-233-1005

Dean Shelwin Student who will receive funding Parent's Name Rosk Dixon; J. Shelwin Parent's phone number 233-1005

5 Grade Student's Grade Student's Teacher Mrs. Melo Principal S. Billeaudean

406 Patterson St. School Address Date instrument is needed Sept. 5, 2007

303 MhK Jr. Dr. Student's Address Instrument Trumpet

- Please itemize instrument and any other items needed; include cost per item.
- | | |
|---|---|
| 1. <u>Trumpet</u> \$ <u>200.00</u> | 2. <u>Accent on Achievement Book 1</u> \$ <u>8.00</u> |
| 3. <u>Wire music stand</u> \$ <u>10.00</u> | 4. <u>Accessory Kit</u> \$ <u>19.00</u> |
| <u>Valve oil</u> | <u>Slide grease</u> |
| Total cost of instrument & supplies: \$ <u>233.00</u> | \$ <u>58.25</u> |
| | Parent's Contribution (25% of total cost) |

Why does this student qualify for this assistance? Low income family

[Signature]
 School Board Employee Signature

Rosk M. Dixon
 Parent / Legal Guardian Signature

[Signature]
 Principal Signature

Dean Shelwin
 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.

34