

Date of Application: _____

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**

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.

Broadmoor Elementary \$43.00
School Funding Request
Angela Vesper teacher 984-3399
School Board Employee Position Phone Number
Montrea Harrison Vanessa Adams \$0
Student who will receive funding Parent's Name Parent's Contribution
4 Angela Vesper 591-0597
Student's Grade Student's Teacher Parent's phone number
Space Center Houston March 20, 2008
Title of enrichment activity Date of Activity
609 Broadmoor Blvd. Jane Kearley
School Address Principal

Area of Interest: ☒ Academic ☐ Cultural ☐ Personal Enrichment

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

- bus expense \$27.00
- lunch at NASA \$6.00
- entry fee to NASA \$10.00
- \$

Why does this student qualify for this assistance? _____

Angela Vesper
School Board Employee Signature
Vanessa Adams
Parent / Legal Guardian Signature

Jane Kearley
Principal Signature
Montrea Harrison
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) 914-7535 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.