Date of Application: 1/29/08

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 — School
$ 43.00 — Funding Request

School Board Employee
Position
Phone Number

Victoria Kedinger — Student who will receive funding
Angie Lemaine — Parent's Name
$ _____ — Parent's Contribution

4th — Student's Grade
A. Patin — Student's Teacher
278-7280 — Parent's phone number

Space Center Houston — Title of enrichment activity
3/20/08 — Date of Activity

609 Broadmoor Blvd. — School Address
Jane Kearley — Principal

Area of interest: ✓ Academic _____ Cultural _____ Personal Enrichment

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

1. bus expense $ 27.00
2. Entry fee. to NASA $ 10.00
3. lunch at NASA $ 6.00
4. _____ $ _____

Why does this student qualify for this assistance? _____

Ashley Patin — School Board Employee Signature
Jane Kearley — Principal Signature
Angie LeMaine — Parent / Legal Guardian Signature
Victoria Kedinger — 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.