

Date of Application: 2/29/08

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.

J. Wallace James

School

\$ 7.00

Funding Request

Cissy Whip

School Board Employee

Dance Instructor 234-9862

Position

Phone Number

Nellie Rose Harris

Student who will receive funding

Stacy Jones

Parent's Name

\$ 0

Parent's Contribution

5th

Student's Grade

Ms. Haitt

Student's Teacher

235-9395

Parent's phone number

Arts Field Trip - Heymann Center

Title of enrichment activity

Feb. 28, 2008

Date of Activity

1500 W. Willow, Scott, LA 70583

School Address

Dana Sircarsah

Principal

Area of Interest: _____ Academic ☒ Cultural _____ Personal Enrichment

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

1. ticket price \$ 7.00

2. _____ \$ _____

3. _____ \$ _____

4. _____ \$ _____

Why does this student qualify for this assistance? economic hardship

Cissy Whip

School Board Employee Signature

Michelle L. Carley

Principal Signature, Asst. Principal

Stacy Jones

Parent / Legal Guardian Signature

Nellie Harris

Student Signature

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