

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 2008-2009**



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 the month.
 *One Activity per application please.

School Broadmoor Elem. Funding Request \$42.00
 School Board Employee Angela Vesper Position Teacher Phone Number 984-3349
 Student who will receive funding Dylan Credeur Parent's Name Amiee/Chad Credeur Parent's Contribution \$0
 Student's Grade 4 Student's Teacher Angela Vesper Parent's phone number 347-0521
 Title of enrichment activity NASA - Johnston Space Center Date of Activity 4-9-09
 School Address 609 Broadmoor Blvd. Principal Cindy Duhon

Area of Interest: ☒ Academic ☐ Cultural ☒ Personal Enrichment

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

1. bus \$ 24.00
2. lunch \$ 8.00
3. entry fee \$ 10.00
4. _____ \$ _____

Why does this student qualify for this assistance? family hardship

Angela Vesper
 School Board Employee Signature
Amiee E. Credeur
 Parent / Legal Guardian Signature

Cindy Duhon
 Principal Signature
Dylan Credeur
 Student Signature

*All information and signatures must be provided for consideration of scholarship. For more information call John Broussard at 337-984-7785. Please Fax application to John Broussard at (337) 984-7535

