

Date of Application: 2/20/09

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 70506
**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 requests will be made payable to the school and sent by the 15th of each month.
*One Activity per application please.

J. W. Faulk Elementary \$ 32.00
School Funding Request
Terri Cockrell Math Club Advisor 233-5820
School Board Employee Position Phone Number
Arissa Berotte Arissa Berotte
Student who will receive funding Parents Name
5 Terri Cockrell Parent's Contribution
Student's Grade Student's Teacher 347-2001
Parent's phone number
Johnson Space Center Fieldtrip April 24, 2009
Title of enrichment activity Date of Activity
111 E. Willow Lafayette, LA
School Address 70501 Principal

Area of Interest: ☒ Academic ☐ Cultural ☐ Personal Enrichment

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

1. transportation \$ 20
2. _____ \$ _____
3. t-shirt \$ 12
4. _____ \$ _____

Why does this student qualify for this assistance? Arissa qualifies for this trip, but has not registered due to financial hardship

Terri Cockrell
School Board Employee Signature
Arissa Berotte
Parent / Legal Guardian Signature

Carol D. Gray
Principal Signature
Arissa Berotte
Student Signature

*All information and signatures must be provided for consideration of scholarship. For more information please contact Michele Izzo at 337-504-2812, please fax application to John Broussard (337) 994-7536 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70506.