

Date of Application: 8-18-09

Shining Light Use Only:

Granted: _____

Amount: _____

Check Number: _____

8583



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 Prairie Elem. Funding Request \$ 70.00 ~~42.00~~

School Board Employee Pat Worley Position counselor Phone Number 984-3391

Student who will receive funding Normalynn Collins Parent's Name Denise Collins Parent's Contribution \$ 0

Student's Grade 4 Student's Teacher A. Watts Parent's phone number 237-7894

Title of enrichment activity NASA - Houston, TX Date of Activity 4-24-09

School Address 2910 Amb. Caffery 70506 Principal Gwen Lewis

Area of Interest: Academic Cultural Personal Enrichment

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

- NASA \$ 60
- T-Shirt/souvenirs \$ 10
- _____ \$ _____
- _____ \$ _____

Why does this student qualify for this assistance? Parent has been unable to pay - without this assistance Normalynn would have to miss this trip.

School Board Employee (Signature) Pat Worley

Principal Signature Gwen Lewis

Parent / Legal Guardian Signature Denise Collins

Student Signature Normalynn Collins

*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 or mail to Shining Light Foundation, P.O. Box.60602, Lafayette, LA 70596.