

Date of Application: _____

Shining Light Use Only:
 Granted: _____
 Amount: _____
 Check Number: _____

Shining Light Foundation

To provide opportunities so that every child a light will shine



P.O. Box 60602
 Lafayette, LA 70596
**EXTRA CURRICULAR ASSISTANCE
 SCHOLARSHIP APPLICATION 2009-2010**

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.

Acadian Middle School
 School \$ 217.50
 Funding Request

Kristen Richard
 School Board Employee Position Band Director
 Phone Number 232 2045

Ethan Rabreau
 Student who will receive funding Parent/Guardian's Name Heather Rabreau
 \$ 72.50
 Parent's Contribution

5th
 Student's Grade Kristen Richard
 Student's Teacher 264-4379/315 7519
 Parent's phone number

4201 Moss Street
 School Address Al Larrigue
 Principal

Band
 Title of enrichment activity 09/10 School Year
 Date of Activity

Area of Interest: ☒ Academic ☒ Cultural ☐ Personal Enrichment

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

1. Band - School Year
 2. _____
 3. _____ \$ _____
 4. _____ \$ _____

Why does this student qualify for this assistance? The student is further in unemployed due to an the job injury.

Kristen Richard
 School Board Employee's Signature
Heather Rabreau
 Parent / Legal Guardian's Signature

Al Larrigue
 Principal's Signature
Ethan Rabreau
 Student's Signature

*All information and signatures must be provided for consideration of scholarship. For more information call John Broussard at 337-298-1588. Please Fax application to John Broussard at (337) 994-7535 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.

Sallyphone

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