

Date of Application: 7-30-09

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 70596

SCHOLARSHIP APPLICATION 2009-2010

Prof Erny's Music Co.

Additional Accessories Application



APPLICATION INFORMATION: Applications must be faxed or postmarked by the 1<sup>st</sup> of the month.  
\*One child per application please.

Plantation School \$ 40.43 Funding Request (75% of total cost)

Hannah Lucille Zavala Student who will receive funding  
Rebecca Clark Parent/Guardian's Name  
337 781-5792 Parent's phone number

Prof Erny's Employee sth Position \_\_\_\_\_ Phone Number \_\_\_\_\_

Student's Grade \_\_\_\_\_ Student's Band Teacher \_\_\_\_\_  
252 John Wayne Dr Laf 70508 Student's Address  
Clarinet Instrument

Please itemize needed accessories; include cost per item.

- |  |   |
|--|---|
| 1. <u>Book</u> \$ <u>6.95</u>              | 2. <u>Stand</u> \$ <u>10.00</u>                           |
| 3. <u>Kare Kit</u> \$ <u>15.00</u>         | 4. <u>Reeds</u> \$ <u>16.95</u>                           |
| Total cost of accessories: \$ <u>53.90</u> | 5. <u>Reed guard</u> \$ <u>5.00</u>                       |
|  | \$ <u>13.48</u> Parent's Contribution (25% of total cost) |

Why does this student qualify for this assistance? Already qualified for Band - instrument

[Signature] \_\_\_\_\_  
Rebecca Clark Parent / Legal Guardian's Signature  
 \_\_\_\_\_ Student's Signature

Prof Erny's Employee's Signature \_\_\_\_\_ Date \_\_\_\_\_

\*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) 964-7535 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.

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