

Date of Application: 11/10/09

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

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.**

Duson Elementary \$ 9⁰⁰
 School Funding Request

Angela Simmons Counselor 873 6629
 School Board Employee Position Phone Number

Micah Bourque Lula Plowden \$ 0
 Student who will receive funding Parent/Guardian's Name Parent's Contribution

1st J. Laviolette 371-1647
 Student's Grade Student's Teacher Parent's phone number

301 4th St. / PO Box 7 K. Rayburn
 School Address Principal

Slim Goodbody 01/28/10
 Title of enrichment activity Date of Activity

Area of Interest: Academic Cultural Personal Enrichment

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

- Ticket \$6⁰⁰
- _____ \$ _____
- Bus \$3⁰⁰
- _____ \$ _____

Why does this student qualify for this assistance? financial hardship

[Signature]
School Board Employee's Signature

Katherine Rayburn
Principal's Signature

Lula B Plowden
Parent / Legal Guardian's Signature

Micah Bourque
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) 984-7535 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.

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