

Date of Application: 11-12-09

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 2007-2008**

**APPLICATION INFORMATION:** Applications must be faxed or postmarked by the 1<sup>st</sup> of the month. (See Back) All scholarship checks will be made payable to the school and sent by the 15<sup>th</sup> of each month. \*One Activity per application please.

Woodvale \$ 35.00  
School Charla Mercier Funding Request

School Board Employee \_\_\_\_\_ Position Teacher-Gifted Phone Number 984-8011  
2nd & 4th

Student who will receive funding Natalya Chicks Parent's Name Olivia Wiemar Parent's Contribution \$ 10.00  
(337) 504-5552

Student's Grade 2 Student's Teacher Charla Mercier Parent's phone number (337) 504-5552

Ocean Life-Moody Gardens January 15, 2010  
Title of enrichment activity Date of Activity

100 Leon Dr., Lafayette, LA 70503 Vera Shanklin  
School Address Principal

Area of Interest: \_\_\_\_\_ Academic \_\_\_\_\_ Cultural  Personal Enrichment

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

1. Bus fee to Moody Gardens in Galveston, TX. \$ 36.75
2. \_\_\_\_\_ \$ \_\_\_\_\_
3. Entrance fee to Moody Gardens. \$ 8.25
4. \_\_\_\_\_ \$ \_\_\_\_\_

Why does this student qualify for this assistance? Financial Hardship

Charla Mercier  
School Board Employee Signature

Vera Shanklin  
Principal Signature

Olivia Wiemar  
Parent / Legal Guardian Signature

Natalya Chicks  
Student Signature

\*All information and signatures must be provided for consideration of scholarship. For more information please contact Michelle Izzo at 337-504-2812, please fax application to John Broussard (337) 984-7535 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.