

Date of Application: 12/7/09

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.

Ernest Gallet
School

\$10.00
Funding Request

Jill LeBlanc
School Board Employee

Teacher
Position

856-1934
Phone Number

Victoria Waltz
Student who will receive funding

Tasha Latiolais
Parent/Guardian's Name

\$0
Parent's Contribution

1st
Student's Grade

J. LeBlanc
Student's Teacher

517-9293
Parent's phone number

2901 E Milton Ave.
School Address

N. Thomas
Principal

Suessical the Play
Title of enrichment activity

Feb. 9, 2010
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. Play \$ 8.00

3. Bus \$ 2.00

2. _____ \$ _____
4. _____ \$ _____

Why does this student qualify for this assistance? Mom helps tremendously with school work and activities. Fees are paid but dad last job so she needs a little extra help at this time.

Jill LeBlanc
School Board Employee's Signature

Principal's Signature

Tasha Latiolais
Parent / Legal Guardian's Signature

Victoria
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) 984-7537 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.