

Date of Application: 2-12-10

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.

School: Prairie Elementary Funding Request: \$ 40.00

School Board Employee: Claire Richard Position: Teacher Phone Number: 337 458 0650

Student who will receive funding: Analee Robles Parent/Guardian's Name: Olga Mochy Parent's Contribution: \$ 0

Student's Grade: 5 Student's Teacher: Claire Richard Parent's phone number: Olga Mochy

School Address: 2910 Ambassador Cyberg Principal: Gwen Lewis

Title of enrichment activity: EMAX, Aquarium, Insectarium Date of Activity: 5/14/10

Area of Interest: Academic Cultural Personal Enrichment

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

- New Orleans Field Trip \$ 40.00
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____

Why does this student qualify for this assistance? This family struggles financially. This child deserves the opportunity to experience this field trip.

School Board Employee's Signature: Inacy Lopez Principal's Signature: Gwen Lewis

Parent / Legal Guardian's Signature: [Signature] Student's Signature: Analee Robles

*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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