

Date of Application: 10/22/10

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 2010-2011**

**APPLICATION INFORMATION:** Applications must be faxed or postmarked by the 1<sup>st</sup> of the month prior to the scheduled field trip. (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.

School: Duson Elementary Funding Request: \$ 7.00

Teacher or Counselor: A. Simmons Position: Counselor Phone Number: 873 6629

Student who will receive funding: Hillary Johnson Parent/Guardian's Name: Elizabeth Johnson Parent's Contribution: \$ 0

Student's Grade: K Student's Teacher: T. Woodel Parent's phone number: 337-873 2944

School Address: 301 4th St. / PO Box 7, Duson LA 70529 Principal: K. Rayburn

Title of enrichment activity: Pumpkin Patch Date of Activity: 10/25/10

Area of Interest:  Academic  Cultural  Personal Enrichment

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

- |                |                |          |          |
|----------------|----------------|----------|----------|
| 1. <u>Trip</u> | \$ <u>3.50</u> | 2. _____ | \$ _____ |
| 3. <u>Bus</u>  | \$ <u>3.50</u> | 4. _____ | \$ _____ |

Why does this student qualify for this assistance? can't afford extra costs @ this time.

Teacher or Counselor's Signature: Debra Simmons

Parent / Legal Guardian's Signature: Elizabeth Johnson

Principal's Signature: Katherine Rayburn

Student's Signature: Hillary Johnson

\*All information and signatures must be provided for consideration of scholarship. For more information call John Broussard at 337-296-1588. Please Fax application to John Broussard at (337) 501-2165 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.

30