

Date of Application: 3/25/11

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 1st 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 15th of each month. *One Activity per application please

School: Duson Elementary Funding Request: \$ 900

Teacher or Counselor: A. Simmons Position: Couns. Phone Number: 5217660

Student who will receive funding: Chasira Bihm Parent/Guardian's Name: Nicole Bihm Parent's Contribution: \$ 0

Student's Grade: 1st Student's Teacher: Murray Parent's phone number: 255 9158

School Address: 301 4th St / PO Box 7, Duson LA 70509 Principal: K. Rayburn

Title of enrichment activity: Zoo of Acadiana Date of Activity: 4-11-2011

Area of Interest: Academic Cultural Personal Enrichment

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

1. Bus transportation \$ 2.00
2. train ride at zoo \$ 2.00
3. Entrance to zoo \$ 3.50
4. water/snack \$ 1.50

Why does this student qualify for this assistance? financial hardship

Christine Murray
Teacher or Counselor's Signature

Nicole Bihm
Parent / Legal Guardian's Signature

Katherine Rayburn
Principal's Signature

Chasira Bihm
Student's Signature

*All information and signatures must be provided for consideration of scholarship. For more information call John Hussard at 337-299-1588. Please Fax application to John Hussard at (337) 299-1655 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.

40