

Date of Application: _____

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.

Duson Elementary \$ 8.00

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Duson Elementary \$ 9.00

School

Funding Request

A. Simmons /
Teacher or Counselor

Caine /
Position

8736629
Phone Number

Kerica Infante
Student who will receive funding

Erica Infante
Parent/Guardian's Name

Parent's phone number

Student's Grade

Broussard
Student's Teacher

873-2908
Parent's phone number

301 4th St / PO Box 7, Duson LA 70529
School Address

K. Rayburn
Principal

Zoo of Acadiana
Title of enrichment activity

4-11-2011
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. Bus transportation \$ 2.00
- 2. train ride of 200 \$ 2.00
- 3. Entrance to zoo \$ 3.50
- 4. water/snack \$ 1.50

Why does this student qualify for this assistance? financial hardship

Michelle Gibson
Teacher or Counselor's Signature

Katherine Rayburn
Principal's Signature

KERICA INFANTE
Parent / Legal Guardian's Signature

KERICA INFANTE
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) 504-2165 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.

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