

Date of Application: 3-1-11

Shining Light Use Only:
Granted: _____
Amount: _____
Check Number: <u>468</u>



Shining Light Foundation

To provide an opportunity for all children to shine their light.

P.O. Box 60602
Lafayette, LA 70596

**EXTRA CURRICULAR ASSISTANCE
SCHOLARSHIP APPLICATION 2010-2011
Musical Instrument Application**



Tutoring

APPLICATION INFORMATION: Applications must be faxed or postmarked by the 1st of the month.
*One child per application please.

School JW James Funding Request (75% of total cost) \$ 250.00

Teacher or Counselor Rose Hegger Position 5th gr. homeroom Phone Number 521-7700

Student who will receive funding Montraven Fuselier Parent/Guardian's Name Tiffany Lewis Parent's phone number 255-3189

Student's Grade 5 Student's Teacher Mrs Hegger Principal Schmersahl

School Address 1500 W. Willow Date instrument is needed 3/1/11

Student's Address 218 E. Foch St. Laf. LA. 70501 Tuition-Sylvan
scholarship

Please itemize instrument and any other items needed; include cost per item.

- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____

Total cost of instrument & supplies: \$ _____
Parent's Contribution (25% of total cost)

Why does this student qualify for this assistance? Low performing

Teacher or Counselor's Signature [Signature] Principal's Signature [Signature]

Parent/Legal Guardian's Signature [Signature] 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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