

Date of Application: 11/2/11

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 2011-2012
 Musical Instrument Application**



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

Charles M. Burke Elementary s. 187.50
School Funding Request (75% of total cost)

Chiffonia Jackson School Counselor 521-8633
Teacher or Counselor's Name Position Phone Number

Crandell Solomon Courtney Russell (337) 706-7586
Student who will receive funding Parent/Guardian's Name Parent's phone number

5th G. Benoit / Van Wick Mrs. Williams Durand
Student's Grade Student's Teacher Principal

2845 Ridge Road Duson LA 70529 521-7631
School Address School Fax Number

100 Falcon St. Apt A ASAP
Student's Address Date instrument is needed

Trombone \$ 250 \$ 62.50
Instrument Package Price Parent's Contribution (25% of total cost)

Book Name _____ Reed Strength _____
(Sax & Clarinet only)

Why does this student qualify for this assistance? _____

Chiffonia Jackson
Teacher or Counselor's Signature

[Signature]
Principal's Signature

Courtney Russell
Parent / Legal Guardian's Signature

Crandell Solomon
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) 504-2166 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.

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