

Date of Application: 9/13/11

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.

School Acadian Middle School \$ 266²⁵
Funding Request (75% of total cost)

Teacher or Counselor's Name Leola Woods Position Band Teacher Phone Number 521-7840

Student who will receive funding David Chaparro Parent/Guardian's Name Israel Chaparro Parent's phone number 702-521-0468

Student's Grade 5th Student's Teacher Mrs. Wood Principal Alvin Lasseigne

School Address 4201 Noss St. Lafayette La 70507 School Fax Number 521-7841

Student's Address 200 High Meadows Blvd #216 Lafayette La 70507 Date instrument is needed ASAP

Instrument Package Saxophone Price \$ 355 Parent's Contribution (25% of total cost) \$ 88.75

Book Name Accent on Achievement Reed Strength sax - 2 1/2
(Sax & Clarinet only)

Why does this student qualify for this assistance? Family income very low. No money available for instrument.

Teacher or Counselor's Signature Leola Woods

Principal's Signature Alvin Lasseigne

Parent / Legal Guardian's Signature Israel Chaparro

Student's Signature David Chaparro

*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.