

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 2011-2012**

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.

Ernest Gallet Elem

School

\$ 6.50

Funding Request

M. Booth

Teacher or Counselor

Teacher

Position

521-7690

Phone Number

Areonia Alexander

Student who will receive funding

Antoinette Alexander

Parent/Guardian's Name

\$ -0-

Parent's Contribution

1

Student's Grade

Mura Booth

Student's Teacher

501-4275

Parent's phone number

2901 E. Milton Ave

School Address

Nicholas Thomas

Principal

Pumpkin Patch

Title of enrichment activity

10/11/11

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. Pumpkin Patch \$ 3.50

2. Bus \$ 3.00

3. _____ \$ _____

4. _____ \$ _____

Why does this student qualify for this assistance? 3 students in same grade level; attempting to send what she can towards school instruction fees.

Mura Booth

Teacher or Counselor's Signature

Nicholas Thomas

Principal's Signature

Antoinette Alexander

Parent / Legal Guardian's Signature

Areonia Alexander

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) 504-2185 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.