

Date of Application: 8/25/2011

Shining Light Use Only:

Granted: _____

Amount: _____

Check Number: _____

* The mother just told me she
has no money for the trip
today 10/24/11



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.

Duson Elem School \$ 850 Funding Request
T. Woodel Teacher or Counselor Teacher Position 521-71660 Phone Number
Holmes Bilm Student who will receive funding Doyle Bilm Parent/Guardian's Name \$ 0 Parent's Contribution
K Student's Grade T. Woodel Student's Teacher 2544891 Parent's phone number
P.O. Box 7 School Address Duson Katherine Rayburn Principal
Trip to Penkin Patch Title of enrichment activity 10/28/11 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. _____ \$ _____ 2. _____ \$ _____
3. _____ \$ _____ 4. _____ \$ _____

Why does this student qualify for this assistance?

the money

Mr Teacher or Counselor's Signature

Doyle Bilm Parent / Legal Guardian's Signature

2403211 Principal's Signature

Holmes Bilm 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) 504-2155 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.

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