

Date of Application: 4/4/12

Shining Light Use Only:

Granted: _____

Amount: _____

Check Number: 501

Shining Light Foundation

"To provide opportunities so that every child's light will shine"



\$125

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.

J.W. Faulk School \$ 25 Funding Request

C. Sciarrillo Teacher (337) 577-6651 Phone Number

Garyian Hypolite Student who will receive funding Victoria Hypolite Parent/Guardian's Name \$ 0 Parent's Contribution

1st Student's Grade C. Sciarrillo Student's Teacher 255-5154 Parent's phone number

711 E Willow St. School Address S. Francis Principal

Field Trip Title of enrichment activity 4/12, 4/13, 4/16, 4/17 Date of Activity

Area of Interest: Academic Cultural Personal Enrichment

Describe the enrichment activity the student will participate in. Please itemize all trip expenses.

- Movies \$ 7.25
- Avery Island \$ 3.25
- Children's Museum \$ 8.25
- Bowling \$ 6.25

Why does this student qualify for this assistance? She has a brother in Kindergarten and they are going on Field Trips that also cost about the same. So I would like to help her parents.

Catherine J. Faulk Teacher or Counselor's Signature [Signature] Principal's Signature

[Signature] Parent / Legal Guardian's Signature Garyian Hypolite 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 Fax or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.

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