

Date of Application: 8-31-12

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 SJ Montgomery\$ 266.25

Funding Request (75% of total cost)

Teacher or Counselor's Name Jenny AndrepostPosition CounselorPhone Number 521-7750Student who will receive funding Reginald HollowayParent/Guardian's Name Lacey BoudreauxParent's phone number 280-0171/371-0605Student's Grade 5Student's Teacher Dana FloresPrincipal Janine LaFleurSchool Address 600 Foreman Drive Laf. LA 70506School Fax Number 521-7751Student's Address 1107 Dulles Drive Laf LA 70506Date instrument is needed Sept. 7th 2012Instrument Package SaxophonePrice \$ 355

(All Instruments will come with care kit & accessories)

 Parent's Contribution
 (25% of total cost) \$ 88.75
Book Name Essential Elements 2000Reed Strength 2

(Sax & Clarinet only)

 Why does this student qualify for this assistance? Student's mom is a single mother who also has an infant. She works but much of her income goes to day care and after school care. Student also has cerebral palsy and there are medical costs associated
Teacher or Counselor's Signature Jenny AndrepostPrincipal's Signature Janine LaFleurParent / Legal Guardian's Signature Lacey BoudreauxStudent's Signature Reginald Holloway

*All information and signatures must be provided for consideration of scholarship. For more information call John Broussard at 337-298-1688. Please Fax application to John Broussard at (337) 504-2165 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.

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