

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 Musical Instrument Application



APPLICATION INFORMATION: Applications must be faxed or postmarked by the 1st of the month.
*One child per application please.

Acadian Middle \$ 187⁵⁰
 School Funding Request (75% of total cost)

J. Woods Teacher 521-7840
 Teacher or Counselor's Name Position Phone Number

Kei Shawne Blanc Shawne Blanc 337-731-9704
 Student who will receive funding Parent/Guardian's Name Parent's phone number

5th J. Woods L. Nance
 Student's Grade Student's Teacher Principal

5201 Moss St 521-7841
 School Address School Fax Number

305 Bell North Dr. MSAP
 Student's Address Date instrument is needed

Trumpet \$ 250⁰⁰ \$ 62⁵⁰
 Instrument Package Price Parent's Contribution (25% of total cost)

Accent On Achievement Reed Strength _____
 Book Name (Sax & Clarinet only)

Why does this student qualify for this assistance? Low income

J. Woods L. Nance
 Teacher or Counselor's Signature Principal's Signature

Shawne Blanc Kei Shawne Blanc
 Parent / Legal Guardian's Signature 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 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.

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