

Date of Application

8/26/14

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 2014-2015 Musical Instrument Application



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

Acadian Middle

School

\$ 187.50

Funding Request (75% of total cost)

Carter

Teacher or Counselor's Name

Teacher

Position

Phone Number

Shay Myers

Student who will receive funding

Shante Myers

Parent/Guardian's Name

3616-4137

Parent's phone number

5th

Student's Grade

Carter

Student's Teacher

Principal

4201 Moss St.

School Address

521-7840

School Fax Number

170111st Rd. Lafayette

Student's Address

Sep. 15

Date instrument is needed

Trombone

Instrument Package

(All instruments will come with case kit & accessories)

\$ 250.00

Price

\$ 40.00 62.50

Parent's Contribution
(25% of total cost)

Book Name

A.O.A

Reed Strength

(Sax & Clarinet only)

Why does this student qualify for this assistance?

Fixed income

Shay Myers

Teacher or Counselor's Signature

Shay Myers

Principal's Signature

Shay Myers

Parent / Legal Guardian's Signature

Shay Myers

Student's Signature

*All information and signatures must be provided for consideration of scholarship. For more information call John Broussard at 337-288-1588. Please Fax application to John Broussard at (337) 504-2166 or mail to Shining Light Foundation, P.O. Box 60602, Lafayette, LA 70596.

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