

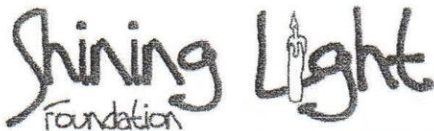
Date of Application: _____

Shining Light Use Only:

Granted: _____

Amount: _____

Check Number: _____



"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**

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.

Woodvale Elementary
School

\$ 34.00
Funding Request

Frances Edwards
Teacher or Counselor

Teacher
Position

Phone Number

Isaiah Holliday
Student who will receive funding

Sharon Smith
Parent/Guardian's Name

Parent's Contribution

2nd
Student's Grade

Frances Edwards
Student's Teacher

337 693-0429
Parent's phone number

100 Leon Dr
School Address

Monique Vidos
Principal

Global Wildlife Center-Science
Title of enrichment activity

March 27, 2015
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?

Child is considered homeless and lives with older grandparent.

Does this student qualify for free lunch? Yes ☒ No ☐

Frances Edwards
Teacher or Counselor's Signature

Christy Hayes, A.P.
Principal's Signature

Sharon Smith
Parent / Legal Guardian's Signature

Isaiah Holliday
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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