

Date of Application: 4-16-15

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

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.

CHES School \$ 15.75 Funding Request

Courtney Sykes Teacher or Counselor Counselor Position 337 521 7690 Phone Number

Logan Wiltz Student who will receive funding Andrenique Navy Parent/Guardian's Name \$ Parent's Contribution

K Student's Grade Mrs Denise Student's Teacher 337 492 3892 Parent's phone number

601 Teema Rd, Carencro LA School Address Henry Thomas Principal

Educational movie Title of enrichment activity 4-17-15 Date of Activity

Area of Interest: Academic Cultural Personal Enrichment

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

- Monkey Kingdom \$ 7.75
- snacks \$ 5-
- Bus Fee \$ 2.00
- _____ \$ _____

Why does this student qualify for this assistance? lack of finding funding available in family

Does this student qualify for free lunch? Yes [] No []

Courtney Sykes
Teacher or Counselor's Signature

Henry Thomas
Principal's Signature

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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