

Date of Application: _____

Shining Light Use Only:
Granted: _____
Amount: _____
Check Number: _____

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MUSICAL INSTRUMENT SCHOLARSHIP APPLICATION 2016-2017

PLEASE PRINT

APPLICATION INFORMATION: Applications must be faxed to John Broussard at (337) 521-7951 or mailed with a postmark by the 1st of the month prior to the scheduled activity. (See attached guidelines.) All scholarship checks will be made payable to the school and sent by the 15th of each month. One child per application, please. Questions? Contact John Broussard at (337) 298-1588.

SCHOOL INFORMATION

Name of School: RIDGE ELEMENTARY

Address: 2901 S. FIELDS PAN Rd. DUNON LA 70529
 (Street) (City) (State) (Zip Code)

Phone Number: 337-521-7800 Fax Number: 337-521-7801

Teacher/Counselor: M. Van Wick BAND DIRECTOR Email: mavandwick@ipsonline.com
 (Name) (Title)

STUDENT INFORMATION

Student Name: Marina GIBBS Grade: 5

Parent/Guardian: Jazy Gibbs Parent Phone Number: 337 258 8862
 (Name)

Does this student qualify for free lunch? Yes No Reason for assistance? financial need

MUSICAL INSTRUMENT INFORMATION

Type of Instrument Package: Clarinet Package total cost \$ 250.00

Parent contribution (25% of cost) \$ 62.50 Funding request (75% of cost) \$ 187.50

Note: All instruments come with care kit and accessories.

Additional music funding request: Music Book \$ 10.00 Reed \$ _____ Box of 10 _____

Other (explain) _____ \$ _____

M. Van Wick
Teacher / Counselor's Signature

Jazy Gibbs
Parent / Legal Guardian's Signature

Russell Meyer
Principal's Signature

Marina Gibbs
Student's Signature

All information and signatures must be provided for consideration of scholarship.