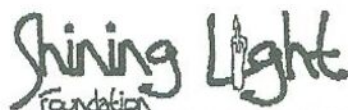


Date of Application: 9-14-16

"To provide opportunities so that every child's light will shine"
P.O. Box 60602, Lafayette, LA 70596

Shining Light Use Only:

Granted: _____

Amount: _____

Check Number: _____

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: J. Wallace JamesAddress: 1500 W. Willow St. Scott, LA 70583
(Street) (City) (State) (Zip Code)Phone Number: 337-521-7700 Fax Number: 337-521-7701Teacher/Counselor: Wendy Mayfield Band Teacher: wnmayfield@jpschools.net
(Name) (Title)

STUDENT INFORMATION

Student Name: Diontrex Senegal Grade: 5thParent/Guardian: Ebony Senegal Parent Phone Number: 337-354-6207
(Name)Does this student qualify for free lunch? Yes ☒ No ☐ Reason for assistance: _____

MUSICAL INSTRUMENT INFORMATION

Type of Instrument Package: Trombone Package total cost \$ _____

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

Note: All instruments come with care kit and accessories.

Additional music funding request: Music Book \$ _____ Reed \$ _____

Other (explain) _____ \$ _____

Teacher / Counselor's Signature

Parent / Legal Guardian's Signature

Principal's Signature

Student's Signature

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

Revision: July 2016