

Date of Application: 2/9/17

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 60802
Lafayette, LA 70598EXTRA CURRICULAR ASSISTANCE
SCHOLARSHIP APPLICATION 2015-2016

APPLICATION INFORMATION: Applications must be faxed or postmarked by the 1st of the month prior to the schedule 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.

School Woodvale Elementary\$ 26.00

Funding Request

Teacher or Coordinator Stephanie VallotPosition teacherPhone Number 337-521-7830Student who will receive funding Nevach BrownParent/Guardian's Name Shanita BrownParent's Contribution \$ -0-Student's Grade 4

Student's Teacher _____

Parent's phone number 337-781-7061School Address 100 Lee DriveTeacher's Email smmose@lpssonline.com

Baton Rouge Zoo

Teacher's Email

Title of enrichment activity Science - Animal species, EcosystemsDate of Activity 5-11-17

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. Bus \$ 17.252. Popcorn \$ 4.253. ZOO Admission \$ 2.504. Train ride \$ 2.00

Why does this student qualify for this assistance?

I would like to see my childon a trip to the zoo, but I can't afford it.Teacher or Coordinator's Signature Stephanie VallotPrincipal's Signature Christy HaysParent / Legal Guardian's Signature Shanita BrownStudent's Signature Nevach Brown

*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.