

Date of Application: 9-14-2016



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: Erangeline Elementary
 Address: 610 E. Butler Switch Lafayette LA 70507
 (Street) (City) (State) (Zip Code)
 Phone Number: 337 521-7670 Fax Number: 337 521-7671
 Teacher/Counselor: Leola Woods Teacher Email: lywoods@lpssonline.com
 (Name) (Title)

STUDENT INFORMATION

Student Name: McKenzie Harris Grade: 5
 Parent/Guardian: Stanley Richard Parent Phone Number: 347-1451
 (Name)
 Does this student qualify for free lunch? Yes No Reason for assistance? _____

MUSICAL INSTRUMENT INFORMATION

Type of Instrument Package: Clarinet Package total cost \$ 250⁰⁰
 Parent contribution (25% of cost) \$ 62⁵⁰ Funding request (75% of cost) \$ 187⁵⁰
 Note: All instruments come with care kit and accessories.
 Additional music funding request: Music Book \$ _____ Reed \$ _____
 Other (explain) _____ \$ _____

Leola Woods
 Teacher / Counselor's Signature
Stanley Richard
 Parent / Legal Guardian's Signature

John Broussard
 Principal's Signature
McKenzie Harris
 Student's Signature

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

Revision: July 2016