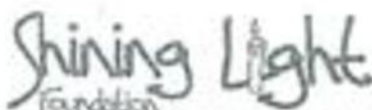


Date of Application: 4/24/18

The foundation supports projects in the state of Louisiana that are in need of funding.  
P.O. Box 60602, Lafayette, LA 70596

Shining Light Use Only:

Granted: \_\_\_\_\_

Amount: \_\_\_\_\_

Check Number: \_\_\_\_\_

## SPECIAL PROJECT SCHOLARSHIP APPLICATION 2017-2018

## PLEASE PRINT

**APPLICATION INFORMATION:** Applications must be faxed to John Broussard at (337) 446-2880 or mailed with a postmark by the 1<sup>st</sup> 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 15<sup>th</sup> of each month. Questions? Contact John Broussard at (337) 298-1588.

## SCHOOL INFORMATION

Name of School: J W Faulk Elementary  
 Address: 711 E Willow St. Lafayette, La. 70501  
 (Street) (City) (State) (Zip Code)  
 Phone Number: (337) 521-7680 Fax Number: (337) 521-7681  
 Teacher/Counselor: Brenda Eccles, Counselor Email: bdeccl@lpssonline.com  
 (Name) (Title)

## STUDENT / SPECIAL PROJECT INFORMATION

Student / Project Name: Ariana Papillion Grade(s): K Number of Students: 75  
 Parent/Guardian: Alexis Papillion Parent Phone Number: (337) 886-5977  
 (if applicable) (if applicable)  
 Do student(s) qualify for free lunch? Yes  No  If YES, approximately how many students? all

## SPECIAL PROJECT INFORMATION

Type of Project / Need: Field trips Total amount requested \$ 15  
 Is there any other funding source for this project? Yes  No  If YES, please indicate the amount: \$ \_\_\_\_\_  
 Please explain project and reason for funding need: Kindergarten field trips  
April 30<sup>th</sup> through May 4<sup>th</sup>  
 Date of Project: \_\_\_\_\_

Brenda Eccles  
 Teacher/Counselor's Signature

[Signature]  
 Principal's Signature

\_\_\_\_\_  
 Parent / Legal Guardian's Signature  
 (if applicable)

\_\_\_\_\_  
 Student's Signature  
 (if applicable)

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

Revision: July 2017