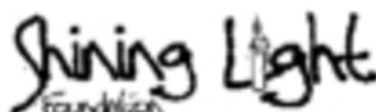


Date of Application: _____



"The person who has the most influence on the world is the person who is the most humble."
P.O. Box 60602, Lafayette, LA 70596

Shining Light Use Only:

Granted: _____

Amount: _____

Check Number: _____

MUSICAL INSTRUMENT 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 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 ELEM.Address: _____
(Street) (City) (State) (Zip Code)

Phone Number: _____ Fax Number: _____

Teacher/Counselor: MAVAN WICK Email: mavanwick@lpschools.net
(Name) (Title)

STUDENT INFORMATION

Student Name: RONALD EVANS Grade: 5Parent/Guardian: LITUAKE EVANS Parent Phone Number: 337-412-5088
(Name)Does this student qualify for free lunch? Yes ☒ No ☐ Reason for assistance? Financial Hardship

MUSICAL INSTRUMENT INFORMATION

Type of Instrument Package: SAXOPHONE Package total cost \$ _____Parent contribution (25% of cost) \$ 88.75 Funding request (75% of cost) \$ _____

Note: All instruments come with care kit and accessories.

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

Other (explain): Achievement Award Book ITeacher / Counselor's Signature: Mavan WickPrincipal's Signature: [Signature]Parent / Legal Guardian's Signature: Litlake EvansStudent's Signature: Ronald Evans

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

Revisions: July 2017