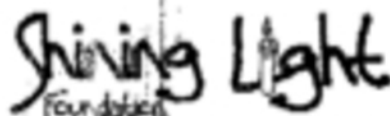


Date of Application: 8-3-19



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: Katharine Drexel Elem
Address: 409 Saint Depores St, Broussard, LA 70518
(Street) (City) (State) (Zip Code)
Phone Number: 337-521-7650 Fax Number: 337-521-7651
Teacher/Counselor: Elizabeth Landry Counselor Email: ellandry@lpssonline.com
(Name) (Title)

STUDENT INFORMATION

Student Name: Sasha McBryde Grade: 5th
Parent/Guardian: Kenya McBryde Parent Phone Number: (337) 371-2090
(Name)
Does this student qualify for free lunch? Yes ☒ No ☐ Reason for assistance? Financial Hardship
due to loss of income

MUSICAL INSTRUMENT INFORMATION

Type of Instrument Package: Open hole Yamaha Flute w/ Bag and Package total cost \$ 1,143.00
2 year insurance
Parent contribution (25% of cost) \$ 285.75 Funding request (75% of cost) \$ 857.25 "PI Pricing"
Note: All instruments come with care kit and accessories.
Additional music funding request: Music Book \$ included Reed \$ _____
Other (explain) _____ \$ _____

Elizabeth Landry
Teacher/Counselor's Signature
Kenya McBryde
Parent / Legal Guardian's Signature

Denise L. Jackson
Principal's Signature
Sasha McBryde
Student's Signature

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

Revision: July 2017