

APPLICATION



A Tribute to Moral Courage: Standing Up Against Injustice

Student Essay Contest

This application **MUST** be complete and is required to be submitted with the other pieces.

No identification (name, school, grade, etc.) should appear on the submitted copies of the essay. This application form has all the necessary information.

Student's Full Name: _____

Student's Grade: _____

Student's HOME Address: _____

Unit/# _____ City _____ State _____ Zip Code _____

Student's Email Address: _____

Title of Essay: _____

Word Count: _____

School Name: _____

School District: _____

Sponsoring Educator's Name: _____

Sponsoring Educator's Email Address: _____

I hereby release ADL, its successors and assigns, from any and all liability from any claims based on my participation in this program and/or related to any photographs, recordings or interviews of me. This work is my original effort. I have submitted only ONE entry. ADL is hereby given the right to reproduce, publish, exhibit and/or use my name, photograph and essay for any and all purposes. ADL is not responsible for lost or damaged submissions.

Student Signature: _____ Date: _____

Required

Parent/Guardian/Caregiver Signature: _____ Date: _____

Required if student is under the age of 18

Please MAIL all documents to:

ADL - Mountain States Region
Attn: Essay Contest
1120 Lincoln Street, Suite 1301
Denver, CO 80203
Tel. 720.799.9676