



White Rose Student Research Contest

Student Application Form

(Remember: Submission Deadline is Friday, March 31, 2023)

To be completed by the student: *(please print)*

Name _____

Address _____

City/State/Zip _____

Telephone _____

Email _____

Grade Level: *(circle one that applies).* *

7 8 9 10 11 12

Entry (Check one) _____ Essay _____ Documentary

This research project is the result of my individual endeavor, expressed in my own words. I understand that in order to be considered for judging, my essay or documentary must meet all contest criteria.

Student's Signature _____

***Students will be judged in three divisions: grades 7-8; grades 9-10; grades 11-12**

Must be signed by parent(s) or guardian(s):

I confirm that my child had met the criteria for the White Rose Student Research Contest. I understand that if my child qualifies as a finalist, he or she will be notified in writing and will be honored at a reception in May. I also understand that if my child places first in his or her division, a cash prize will be awarded to further his or her education.

Parent's or Guardian's Name (Please print)

Address _____

City/State/Zip. _____ **Telephone** _____

Second Parent's or Guardian's Name (if applicable) (Please print)

Address _____

City/State/Zip. _____ **Telephone** _____

Parent or Guardian Signature(s):

Must be completed by sponsoring teacher:

I have reviewed this student's research essay to ensure that it meets all contest criteria.

(see <https://hhrecny.org/human-rights-institute/7620-2/>)

Teacher's Name _____

School _____ **Teaching Assignment** _____

School Address _____ **City/State/Zip** _____

School Telephone/Email/Fax # _____

Teacher's Signature _____

Principal's Name _____ **Telephone** _____

Superintendent's Name _____

Superintendent's Address _____

City/State/Zip _____ **Telephone** _____