



# THE SCHOLASTIC ART & WRITING AWARDS

## Writing Submission Form 2009

The Writing Submission Form 2009 for The Scholastic Art & Writing Awards may only be used by students in grade 7 who are 12 years old or younger OR students located in a region that is not participating in Online Registration. Students using the Writing Submission Form in regions where Online Registration is required may be disqualified. ALL contact information fields are required, including student email.

**STUDENT NAME:** First \_\_\_\_\_ Last \_\_\_\_\_

**PARENT NAME:** First \_\_\_\_\_ Last \_\_\_\_\_ Email \_\_\_\_\_

Home Address (No P.O. Boxes) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth (required) \_\_\_\_\_ Student Email (required) \_\_\_\_\_

Phone (w/area code) \_\_\_\_\_ Fax (w/area code) \_\_\_\_\_

**SCHOOL NAME:** \_\_\_\_\_

**Check one:**  Public School  Public/Art Magnet School  Private School  Parochial School  Home School  Community Based Organization  Other \_\_\_\_\_

School Address (No P.O. Boxes) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (w/area code) \_\_\_\_\_ Fax (w/area code) \_\_\_\_\_

**TEACHER(S) NAME:** Dr./Mr./Ms. First \_\_\_\_\_ Last \_\_\_\_\_ Email \_\_\_\_\_

Dr./Mr./Ms. First \_\_\_\_\_ Last \_\_\_\_\_ Email \_\_\_\_\_

**PRINCIPAL NAME:** Dr./Mr./Ms. First \_\_\_\_\_ Last \_\_\_\_\_

(CIRCLE) GRADE **7** 8 9 10 11 12

**INDIVIDUAL CATEGORIES for all grades (CHECK ONLY ONE):**

- DRAMATIC SCRIPT
- HUMOR
- JOURNALISM
- PERSONAL ESSAY/MEMOIR
- POETRY
- SCIENCE FICTION/FANTASY
- SHORT STORY
- SHORT SHORT STORY
- NOVEL WRITING

Send **Novel Submissions** to  
Alliance for Young Artists & Writers (Novel Writing)  
557 Broadway, New York, NY 10012

**PORTFOLIO CATEGORIES (3-8 WORKS) (OPEN TO GRADUATING SENIORS ONLY)**

- GENERAL WRITING PORTFOLIO  NONFICTION PORTFOLIO

Title	Category	Word Count
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please indicate up to three colleges/universities

	Applied?	Yes/No	Accepted?	Yes/No
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

Title (or Titles for Poetry) \_\_\_\_\_ Word Count \_\_\_\_\_

**CONSENT**

I HAVE READ AND FULLY UNDERSTAND ALL REQUIREMENTS FOR THIS PROGRAM, INCLUDING THE AUTHORSHIP/PLAGIARISM SECTIONS IN THE SCHOLASTIC WRITING AWARDS GUIDELINES. I AGREE TO THE TERMS OF THE PROGRAM, INCLUDING THE RELEASE OF COPYRIGHT RIGHTS CONTAINED IN THE COPYRIGHT RELEASE SECTION. BY MY SIGNATURE, I GRANT PERMISSION TO THE ALLIANCE TO PUBLISH, IN ALL PRINT AND ELECTRONIC MEDIA, THE STUDENT'S NAME, AGE AND NAME AND LOCATION OF THE SCHOOL. I HEREBY AGREE TO PARTICIPATE IN A PROGRAM WHEREBY THE ALLIANCE WILL RELEASE THE INFORMATION GIVEN ABOVE TO COLLEGES AND UNIVERSITIES INTERESTED IN RECOGNIZING AND SUPPORTING YOUNG ARTISTS AND WRITERS.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Teacher Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**STUDENT SURVEY (OPTIONAL):**

The Alliance for Young Artists & Writers is collecting information about the creative students who participate in The Scholastic Art & Writing Awards. This information is NOT used during the judging process.

- Male  Female

The categories below provide descriptions of race/ethnicity. Please check the boxes next to all the categories with which you closely identify yourself.

- African American/Black  American Indian/Alaskan Native  Asian/Pacific Islander  Hispanic  Caucasian/White  Other \_\_\_\_\_

Please indicate your family's household income:

- Less than \$10,000  \$10,000 - \$24,999  \$25,000 - \$39,999  \$40,000 - \$74,999  \$75,000 - \$99,999  \$100,000 or more  I don't know

Is this your first time submitting work to The Scholastic Art & Writing Awards?  Yes  No