



## Official Application Form

### CCAWV 2019 County Government Essay Contest

County: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_

Teacher's Email Address: \_\_\_\_\_

Name of School: \_\_\_\_\_

School Telephone #: \_\_\_\_\_

School Mailing Address: \_\_\_\_\_

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\_\_\_\_\_

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Submitting Student's Name: \_\_\_\_\_

Submitting Student's Email Address: \_\_\_\_\_

*(Teachers, you must submit a copy of this completed form with each student entry.)*