

# 2010 Northern Great Lakes Regional History Day Event – March 6, 2010

## STUDENT ENTRY FORM

**Questions?** Call (715) 479-4473 ext. 1405 or email [atulppo@npsd.k12.wi.us](mailto:atulppo@npsd.k12.wi.us). Forms must be **received** by **Friday, February 26, 2010**.

1. Fill in **ALL INFORMATION**. Please print clearly or type to avoid spelling errors on schedules and certificates. **GROUPS** may photocopy this page to get parent signatures as long as at least one copy lists all group members and forms are stapled together.
2. Include with your student entry form:
  - **ENTRY FEE:** \$5.00 per student. Please make checks payable to "Northern Great Lakes History Day."
  - **SCHOOL REGISTRATION FORM:** One per school, filled out by teacher(s).
  - **PAPERS:** **FOUR** copies of your **PAPER** and **BIBLIOGRAPHY**.
  - **WEBSITES:** **CONTACT REGIONAL COORDINATOR FOR COMPLETE SUBMISSION GUIDELINES**. Includes **online submission** and **FOUR** hard copies of a title page, process paper, and bibliography.
3. **MAIL TO:** Alan Tulppo, Northland Pines High School,  
1800 Pleasure Island Road, Eagle River, WI 54521

### ENTRY INFORMATION

Entry Title \_\_\_\_\_

School: \_\_\_\_\_

Sponsoring Teacher/Advisor: \_\_\_\_\_

#### AGE DIVISION:

- Junior Division (grades 6-8)  
 Senior Division (grades 9-12)

#### PARTICIPATION CATEGORY:

- Individual       Combined (websites only)  
 Group

#### PROJECT CATEGORY:

- Paper       Exhibit       Website  
 Documentary       Performance

#### EXHIBIT ENTRIES ONLY:

- Floor Space       Electrical Outlet  
 Table Space

### STUDENT INFORMATION

**My signature on this form indicates that I have read and understand this statement.** I affirm that the entry submitted for competition was researched and developed by the registered student(s) during the current school year. I understand that National History Day (NHD) in Wisconsin and its sponsors will not be responsible for loss or damage to projects or personal belongings at the event. **Parents/Guardians:** I acknowledge that members of the media and a staff photographer may be present at this History Day event. I give permission to the Wisconsin Historical Society to archive and use recordings that have been taken of my child with respect to photographic images, video images, audio recordings, and written extraction made in connection with their participation in the National History Day program.

**NAME (Individual or Student 1)** \_\_\_\_\_ **Grade** \_\_\_\_\_

**Address** \_\_\_\_\_ **City/Zip** \_\_\_\_\_

**Phone** (    ) \_\_\_\_\_ **E-mail Address** \_\_\_\_\_

**Student Signature** \_\_\_\_\_

**Parent Signature** \_\_\_\_\_

**PRINT Parent's Name:** \_\_\_\_\_

**Group information continues on next page. →**

## STUDENT INFORMATION (CONTINUED)

(2) NAME \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_ City/Zip \_\_\_\_\_

Phone (    ) \_\_\_\_\_ E-mail Address \_\_\_\_\_

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

Parent Signature \_\_\_\_\_

PRINT Parent's Name: \_\_\_\_\_

(3) NAME \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_ City/Zip \_\_\_\_\_

Phone (    ) \_\_\_\_\_ E-mail Address \_\_\_\_\_

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

Parent Signature \_\_\_\_\_

PRINT Parent's Name: \_\_\_\_\_

(4) NAME \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_ City/Zip \_\_\_\_\_

Phone (    ) \_\_\_\_\_ E-mail Address \_\_\_\_\_

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

Parent Signature \_\_\_\_\_

PRINT Parent's Name: \_\_\_\_\_

(5) NAME \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_ City/Zip \_\_\_\_\_

Phone (    ) \_\_\_\_\_ E-mail Address \_\_\_\_\_

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

Parent Signature \_\_\_\_\_

PRINT Parent's Name: \_\_\_\_\_



WISCONSIN  
HISTORICAL  
SOCIETY

The Wisconsin Historical Society is proud to sponsor National History Day in Wisconsin.  
The Northern Great Lakes Regional History Day Event is made possible with the support  
of the Northland Pines School District.

National History Day in Wisconsin  
**2010 SCHOOL REGISTRATION FORM**

**Educators:** Please complete **ONE** copy of this form per school. This form needs to be turned in with student regional event registration forms. (Attach an extra sheet if needed.)

**SCHOOL INFORMATION**

School: \_\_\_\_\_

Street address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Name of lead NHD educator: \_\_\_\_\_

**TOTAL NUMBER OF STUDENTS AT THE SCHOOL WHO WORKED ON ENTRIES** →

*This number includes both students that attended competitions and those that did not!*

**TOTAL NUMBER OF STUDENTS AT THE SCHOOL WHO COMPETED AT A REGIONAL COMPETITION** →

**PARTICIPATING EDUCATORS**

Please list **all educators who worked with NHD this year**, not just those sending students to the contest. Registered teachers will receive next year's NHD curriculum materials automatically in August.

Name	Email Address	Subject Area(s)	Grade Level(s)
1. Lead NHD Educator			
2.			
3.			
4.			
5.			

**PLANNING FOR THE FUTURE**

In order to help regional coordinators plan for future events, please provide your school's spring break dates for the **2010-2011** school year: