

2010 Central Wisconsin Regional History Day Event – Sunday, April 11, 2010

STUDENT ENTRY FORM

Questions? Call Tom Reich at 715-346-4200 or email treich@uwsp.edu. Forms must be **received** by **Monday, March 29, 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 entry. Please make checks payable to the "University of Wisconsin – Stevens Point."
 - **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:** Tom Reich, University Library
Wisconsin History Day, UW-Stevens Point,
900 Reserve St., Stevens Point, WI 54481

ENTRY INFORMATION

Entry Title _____

School: _____

Sponsoring Teacher/Advisor: _____

AGE DIVISION:

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

PROJECT CATEGORY:

- Paper Exhibit Website
 Documentary Performance

PARTICIPATION CATEGORY:

- Individual Combined (websites only)
 Group

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 Central Wisconsin Regional Event is supported by the
University of Wisconsin – Stevens Point

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: