



Student Journal Submission Form ~ Deadline: November 1

Student Information

Student's Name: _____ Grade: _____

Parent's Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone Number: _____

School Information

School Name: _____

School Address: _____

City: _____ State: _____ Zip: _____

English Teacher's Name: _____

Teacher Email: _____

Permissions

Student Signature (certifies writing as student's own):

Parent/Legal Guardian Signature (grants MCTE and its affiliates permission to use student's paper):

By my signature, I agree to give MCTE and its affiliates permission to use the student's work for research and/or to publish or otherwise display the work in all print and electronic media along with the student's name, school, and location.

Mail completed forms by November 1st to:
Kathryn Kritzeck, MCTE Student Journal
MN Humanities Center
987 Ivy Avenue East
St. Paul, MN 5510