

## APPLICATION FORM

Complete the provided application form and attach it to your entry.

Submissions must be received by

**December 18, 2009.**

Entries along with your completed application form should be mailed or delivered to:

*Testimony to Tolerance Initiative*  
Attn: Amanda Ferguson  
Central Arkansas Library System  
100 Rock St.  
Little Rock, AR 72201

Written entries may also be emailed to  
[aferguson@cal.s.org](mailto:aferguson@cal.s.org)

Email entries must include a completed application form.

For more information, or to obtain an electronic version of this application, contact:

Amanda Ferguson  
(501)918-3079 [aferguson@cal.s.org](mailto:aferguson@cal.s.org)

By submitting this work, I acknowledge that I have read and understand the guidelines for this contest. I certify that the entry submitted is my original effort and all information provided is correct to the best of my knowledge. I understand that all entries become the property of the *Testimony to Tolerance Initiative* and the City of Little Rock Racial and Cultural Diversity Commission, and may be used for promotional purposes both during and after the contest.

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

**Parent or Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## APPLICATION FORM

Please print clearly or type. Attach the completed application to your submission.

School Name \_\_\_\_\_

Division (circle one)

I-Middle School    II-High School

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

Your Name \_\_\_\_\_

Your Grade in School \_\_\_\_\_

Your Home Street Address \_\_\_\_\_

Apt # \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

*Lessons from the past...  
Visions of the Future*

**2009/2010**

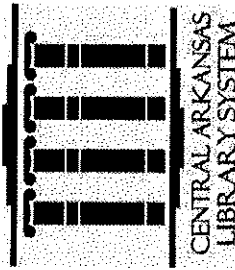
**Middle and High**

**School**

**Art and Writing**

**Contest**

*Sponsored by:*



*Testimony to  
Tolerance*

