



Students: Complete this form to inform your school of your participation in their school-level event for the ESU National Shakespeare Competition.

## FORM SUBMMISSION DEADLINE:

## PLEASE PRINT CLEARLY & CORRECTLY. REMEMBER TO FULLY COMPLETE ALL INFORMATION.

Student's Name:	
Please check one:	Female  or Male
Grade:	
Age:	
Teacher/Class Information	
Participating Class (if applicable):	
Teacher's Name:	
Monologue Selection	
Play:	
Character:	
Act:	
Scene:	
Lines (indicate any lines cut):	
First line (write out):	
Last line (write out):	
Contact Information	
Home Phone:	
Cell Phone:	
Email:	

## Please return this form to your School Competition Coordinator.

School Competition Coordinator's Name:

Submission Method: