

# Illinois Youth Internet Safety Contest Submission Form 2009-2010

Sponsored by the Illinois State Board of Education,  
the Illinois Attorney General, and the Illinois Governor's Office

## Cyberbullying

**INSTRUCTIONS:** Please type or print clearly and provide all information. By signing below, each entrant acknowledges and hereby agrees to all Contest Rules, Terms and Conditions. Please submit this form with the project, Copyright Assignment/Parental Consent for a Minor Form, and Name and Likeness Release Form. Entries are due to the Illinois State Board of Education (ISBE), Curriculum & Instruction Division (C-215), 100 North First Street, Springfield, IL 62777, by March 31, 2010.

PROJECT INFORMATION		
NAME OF PROJECT	TYPE OF PROJECT (Check one) <input type="checkbox"/> Podcast <input type="checkbox"/> Video <input type="checkbox"/> Slideshow <input type="checkbox"/> Poster	GRADE LEVEL
SCHOOL/DISTRICT/SPONSOR INFORMATION		
SCHOOL NAME	SCHOOL ADDRESS (Street, City, State, Zip Code)	
TEACHER NAME	TEACHER SIGNATURE	DATE
TEACHER E-MAIL	TEACHER TELEPHONE NUMBER (include area code)	
PRINCIPAL NAME	PRINCIPAL SIGNATURE	DATE
PRINCIPAL E-MAIL	PRINCIPAL TELEPHONE NUMBER (include area code)	
DISTRICT INFORMATION		
DISTRICT NAME	DISTRICT ADDRESS (Street, City, State, Zip Code)	
SUPERINTENDENT NAME	SUPERINTENDENT SIGNATURE	DATE
SUPERINTENDENT E-MAIL	SUPERINTENDENT TELEPHONE NUMBER (include area code)	
PARENTAL CONSENT		
PARENT/GUARDIAN NAME	SIGNATURE	DATE
1.		
2.		
3.		
CONTACT INFORMATION (Please choose one person to be the contact person for the group)		
CONTACT NAME	CONTACT TITLE	
CONTACT ADDRESS (Street, City, State, Zip Code)		
CONTACT E-MAIL	CONTACT TELEPHONE NUMBER (include area code)	

**If the form is not complete, the project will NOT be judged.**