8th Annual

FREEDOM
Scholarship Essay Contest

2016

STUDENT REGISTRATION FORM

Name (First, Last)					
Home Address					
City		**State**		**Zip Code**	
Home Phone Number		**E-mail**			
High School Name			**Graduation Year**		
College/Univ. you'll attend or have been accepted to:					
Date of Birth		**Essay Word Count**			
How did you discover this contest?					

CERTIFICATION INFORMATION

I certify that this essay is **my own work**. I agree to abide by all guidelines and requirements of the 2016 8th Annual freedom Scholarship Essay Contest. I understand that my essay will not be returned and will become the property of the Freedom Scholarship Essay Contest to use at its discretion and that judges' decisions are final.

I agree to these terms ☐

Signature _____ **Date** _____

MILLIE A. COGGS
6th
DISTRICT
ALDERWOMAN