

2024-2025 ENTRY FORM

YOUNG GEORGIA AUTHORS WRITING COMPETITION

All entries must be **COMPLETE** and **LEGIBLE**.

RESA Number 1

School District: Cartersville City Schools District Coordinator: Randi Sonenshine

District Contact Phone Number: 678-535-6233 Email: rsonenshine@cartersvilleschools.org

Title of Student Work: _____

Student Name: _____ Grade: _____

Parent/Guardian Name: _____ Parent/Guardian Email: _____

Student Home Address: _____
Street/P.O. Box City Zip

School Principal: _____ Email: _____

School Name (not abbreviations): _____

School Mailing Address: _____
Street/P.O. Box City Zip

REQUIRED SIGNATURES

By signing below, I affirm this writing entry is my own original, unassisted work. This work has not been published online prior to or during this academic year. I agree to have my work entered into the Young Georgia Authors Writing Competition to represent my grade for my local school system.

Student Signature

Date

*By signing below, I affirm that I give my permission for the work of the above-named student author, for whom I am the **parent/guardian**, to be entered into the Young Georgia Authors Writing Competition, and for that work to be shared and/or published by the Georgia Department of Education and/or the Georgia Language Arts Supervisors for non-profit purposes.*

Parent/Guardian Signature

Date

*By signing below, I affirm that I am a **system level administrator** and am coordinating the entry of all winning student work from this system for the Young Georgia Authors Competition. I affirm that the work of the above-named student author has been chosen to represent this system for the grade level indicated.*

District Level Administrator Signature

Date

* Unsigned or incomplete forms will cause the attached entry to be disqualified. Attach this completed form to the top of each student entry, along with one photocopy of the entry. Remove the student's name and school from the entry itself. Label the top of each page of the entry with the student's initials, grade level, and RESA number. Please make a copy of the entry before submitting. Entries will not be returned.