

CONTEST ENTRY FORM

Reflection in Action: Building Healthy Communities™

Contest Deadline Date: Friday, March 9, 2012

Event Date: Thursday, May 31, 2012

*Hosted by
Harvard Medical School
Office for Diversity Inclusion and Community Partnership*

Your contest entry must be submitted with a completed contest entry form signed by both you and your parent/guardian.

You must be a 6th, 7th or 8th grade student who lives in Boston or Cambridge, or attends Boston or Cambridge schools, organizations, after school programs, community programs or religious institutions.

Group entrants must **each** complete and return individual contest entry forms with the student and parent/guardian signatures.

A contest entry form must be submitted with your entry. Complete guidelines can be found in the Resource Guide or on our website, www.reflectioninaction.org

Questions about the contest?

Contact: Sheila Nutt, EdD, Director of Educational Outreach Programs
617-432-4634 or Sheila_Nutt@hms.harvard.edu

**Reflection in Action:
building healthy communities™**

Harvard Medical School Office for
Diversity Inclusion and Community Partnership
167 Longwood Avenue, 2nd Floor
Boston, Massachusetts 02115
Ph: 617-432-4634 Fx: 617-432-3834
www.reflectioninaction.org



2012 CONTEST ENTRY / ATTENDANCE PERMISSION FORM

CONTEST DEADLINE: FRIDAY, MARCH 9, 2012

Individual entry **OR** Group entry

A. Student Information

Student Name _____ Date of Birth _____ / _____ / _____
month / day / year

Address _____ City _____ State _____ Zip Code _____

Phone () _____ Email Address _____

Grade (please check one): 6th grade 7th grade 8th grade

How did you hear about the Reflection in Action contest? (Check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> a. former RIA participant | <input type="checkbox"/> e. middle school science teacher | <input type="checkbox"/> i. Facebook |
| <input type="checkbox"/> b. guidance counselor | <input type="checkbox"/> f. middle school art teacher | <input type="checkbox"/> j. bulletin board |
| <input type="checkbox"/> c. Harvard Medical School staff member | <input type="checkbox"/> g. middle school English teacher | <input type="checkbox"/> k. other (please specify) |
| <input type="checkbox"/> d. after-school program leader | <input type="checkbox"/> h. youth group leader | _____ |

Ethnicity/Racial Background

Please complete the optional and confidential information:

- Asian
- Chinese Filipino East Indian Japanese Korean Vietnamese
- Other (specify) _____
- Black (not Hispanic/Latino)
- African-American African (specify) _____
- Caribbean (specify) _____ Other (specify) _____
- Hispanic/Latino
- Cuban Mexican/Mexican American Puerto Rican
- South or Central American (specify) _____ Other (specify) _____
- American Indian/Alaska Native Native Hawaiian/ Other Pacific Islander White (not Hispanic/Latino)
- Unknown Multiple Races (specify in respective categories above) Other (specify) _____

Please check your gender: Female Male

Please check your citizenship status: US Citizen Permanent Resident Student Visa Foreign National

B. School, Organization, After School Program, Community Program, or Religious Institution Information

School Name/Organization Name _____

Address _____ City _____ State _____ Zip Code _____

Phone () _____ Fax () _____

Name of Teacher/Sponsor/Program Director _____



C. Contest Category Information - check only one category (must follow contest guidelines and meet submission entry date)

Visual Categories

- Painting Sketch Drawing
 Collage Photography
 Animation Sculpture

Written Categories

- Essay
 Short Story
 Poetry

Performing Arts Categories

- Song/Rap Spoken Word
 Dance/Step Short Film
 Monologue Skit/Play

Title of entry: _____ Number of students in your group (6 maximum) _____

Health Topics used in your project: _____

Please see RIA Resource Guide for contest themes and guidelines.

D. Deadlines:

Performing Arts: (Song/Rap; Spoken Word; Dance/Step and Skit/Monologue, Short Film, etc.)

- Submission of a script and detailed description of your performance, along **with a completed and signed contest entry form from each of the members**, must be received by **March 9, 2012**.
- Once your entry is received you, or your teacher, will be contacted to schedule a videotaping of your performance. **Performances will be video taped at various locations** by HMS between **March 19 and March 27, 2012**. All entries must have a video-tape or dvd.

Visual and Written Arts

- Submission of your work, along **with a completed and signed contest entry form**, must be received by **March 9, 2012**.
- Visual Art submissions may also include an optional written description of your artwork.

E. Student Signature:

In signing this form, I certify that my entry to the *Reflection in Action: building healthy communities*TM Contest is original and adheres to the contest guidelines. Entering the contest constitutes agreement with these terms.

Student Name (typed or printed)

Signature

F. Parent/Guardian Signature and Information:

In signing this form, I certify that this Contest Entry Form and the guidelines have been read and that the information is correct to the best of my knowledge. **I authorize the *Reflection in Action: building healthy communities*TM Program to use still or video photographs of my child for publicity and/or educational purposes.** In addition, I authorize the *Reflection in Action: building healthy communities*TM Program to exhibit my child's work. I understand that once submitted the contest entries become the property of Harvard Medical School and may be used for promotional purposes. Although precautions will be taken for the safety of the contest entries, Harvard Medical School will not be responsible for loss or damage, however caused.

I understand that Harvard Medical School will retain the information in this application for their records. This information, including identifying information, will be used to follow students through their academic and professional careers and for future communications.

My signature constitutes agreement with the terms stated and gives consent for my child (name):

_____ to attend *Reflection in Action: building healthy communities*TM at
Harvard Medical School on Thursday, May 31, 2012.

Parent/Guardian Name _____ Home phone () _____

Address _____ City _____ State _____ Zip Code _____

Work phone () _____ Cell Phone () _____ Email Address _____

Signature

Date

G. Submit Entry (with signed Contest Entry Form) to:

Reflection in Action: building healthy communitiesTM
Harvard Medical School
Office for Diversity Inclusion and Community Partnership
164 Longwood Avenue, 2nd Floor
Boston, MA 02115