

Teacher Inventory List For Bulk Submissions

[MAKE SURE THAT STUDENTS HAVE COMPLETED THE REQUIRED ENTRY FORM AND ATTACHED IT TO THE BACK OF THEIR ARTWORK]

Teacher: _____ School: _____

Address: _____

City: _____ Zip: _____ Phone: _____ ext: _____

Teacher summer contact info: _____

Student: _____	Title of Work #1 _____
Grade: _____ Age: _____	Title of Work #2 _____
	Title of Work #3 _____

Student: _____	Title of Work #1 _____
Grade: _____ Age: _____	Title of Work #2 _____
	Title of Work #3 _____

Student: _____	Title of Work #1 _____
Grade: _____ Age: _____	Title of Work #2 _____
	Title of Work #3 _____

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Grade: _____ Age: _____	Title of Work #2 _____
	Title of Work #3 _____

Student: _____	Title of Work #1 _____
Grade: _____ Age: _____	Title of Work #2 _____
	Title of Work #3 _____

Student: _____	Title of Work #1 _____
Grade: _____ Age: _____	Title of Work #2 _____
	Title of Work #3 _____

PLEASE CONFIRM WITH YOUR STUDENTS THAT THEY HAVE READ THE GUIDELINES FOR THE CONTEST, THE DISCLAIMER, AND THAT THEY HAVE COMPLETED THE REQUIRED ENTRY FORM AND ATTACHED IT TO THE BACK OF ALL THEIR ARTWORK.

The students are responsible for retrieving their artwork - they have noted whether they will pickup their artwork or have enclosed proper packaging and postage to return by mail.

I accept responsibility for retrieving my students artwork and returning it to them.

Total number of pieces submitted to the Monthly Annual Cover Art Contest _____