



Student Information – Team Project Form (W1A)

(one form per project)

Do not write in this space. Official use ONLY

ENTRY NUMBER: _____
 DATE: _____
 AMOUNT: \$ _____
 PAID : _____ (Y) _____ (N)
 RECEIVED BY: _____
 RELEASE FORM PRESENT: __ (Y) __ (N)
 RELEASE INFO _____ (R) _____ (N)

Project Title: _____

Team Lead				
Student Name: _____ ()				
Last Name	First Name	Home Telephone		
Home Address: _____ --				
Mailing address	City	State	Zip Code	
Student / Parent email: _____				
School Info: _____				
Grade	School's Full Name	School's City	Official Use ONLY	
Teachers Info: _____				
Teacher's Full Name			Teacher's E-Mail Address	

Team Member 2				
Student Name: _____ ()				
Last Name	First Name	Home Telephone		
Home Address: _____ --				
Mailing address	City	State	Zip Code	
Student / Parent email: _____				
School Info: _____				
Grade	School's Full Name	School's City	Official Use ONLY	
Teachers Info: _____				
Teacher's Full Name			Teacher's E-Mail Address	

Team Member 3				
Student Name: _____ ()				
Last Name	First Name	Home Telephone		
Home Address: _____ --				
Mailing address	City	State	Zip Code	
Student / Parent email: _____				
School Info: _____				
Grade	School's Full Name	School's City	Official Use ONLY	
Teachers Info: _____				
Teacher's Full Name			Teacher's E-Mail Address	

Category: Select the category that best fits your project. See WWW.WSSEF.ORG for Descriptions. (Select only one):

- | | | |
|--|--|---|
| <input type="checkbox"/> Animal Sciences
<input type="checkbox"/> Behavioral & Social Sciences
<input type="checkbox"/> Biochemistry
<input type="checkbox"/> Cellular & Molecular Biology
<input type="checkbox"/> Chemistry
<input type="checkbox"/> Computer Science | <input type="checkbox"/> Earth Sciences
<input type="checkbox"/> Engineering: Materials & Bioengineering
<input type="checkbox"/> Engineering: Electrical & Mechanical
<input type="checkbox"/> Energy & Transportation
<input type="checkbox"/> Environmental Analysis
<input type="checkbox"/> Environmental Management | <input type="checkbox"/> Mathematical Sciences
<input type="checkbox"/> Medicine & Health Sciences
<input type="checkbox"/> Microbiology
<input type="checkbox"/> Physics & Astronomy
<input type="checkbox"/> Plant Sciences |
|--|--|---|