Ohio Literacy Resource Center’s
9th Annual
Ohio Writers’ Conference
Submission Form

Adult literacy students who are interested in submitting entries for participation in the 9th Annual Conference can do it in two ways:

1. Complete submission form below and fax to the OLRC at 330-672-4841
2. Email entry including the date, the author’s name, teacher’s name, and program to: writers@literacy.kent.edu

Or

1. Complete submission form below
2. Include one “hard” copy of the entry including the date, the author’s name, teacher’s name, and school
3. Include one “saved” copy in Microsoft Word on a floppy disk. Please label the disk with the author, teacher, title of the piece, and date
4. Send the above to: Chris McKeon, Ohio Writers’ Conference
   Ohio Literacy Resource Center
   Research 1 - 1100 Summit Street
   P.O. Box 5190
   Kent, Ohio 44242-0001

A submission form must accompany each entry. All submissions should be postmarked no later than February 6, 2006. All submissions must be original student work. Any genre is acceptable (i.e., poetry, short stories, reflections, lyrics, etc.). More than one piece of writing may be submitted. Students may co-write pieces with fellow students; all names should appear on the form, the disk, and the hard copy. There is no length restriction for submissions. For further information or questions, you may contact: Chris McKeon at the OLRC 800-765-2897 ext. 20752. Or Email: cmckeon494@aol.com. Be sure to identify your email message in the “subject” as: Ohio Writers’ Conference.

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PLEASE CLEARLY PRINT THE FOLLOWING INFORMATION

For office use only

Author Name_________________________________________ Teacher/Tutor (full name)________________________

Program Information (This section must be filled out)

Program Name________________________________________

Program Address____________________________________ City________________________

Zip_________ Program Phone Number____________________ Email________________________

Fax________________________

Author Contact Info:

Address______________________________________________

City________________________________________________ State ______ Zip_________

Phone________________________ Email____________________ Fax________________________

Title of Entry________________________________________

Please see reverse side
BE SURE TO SIGN AND DATE STATEMENTS BELOW. Failure to do so will result in an unacceptable entry.

STUDENT ASSURANCES
If my work is accepted, I grant the OLRC permission to make minor editorial changes such as grammar, punctuation, or spelling. I also grant the OLRC permission to reprint my work and to include it on the OLRC Website.

__________________________  ___________________
Student Signature                      Date

I verify that the work I have submitted is my own and is not copied from any source including the web.

__________________________  ___________________
Student Signature                      Date

TEACHER ASSURANCES
I verify that this submission is the original work of ____________________________(student’s name).

__________________________  ___________________
Teacher Signature                      Date

Ohio Literacy Resource Center
Enhancing Adult Literacy