



NOMINATION FORM

PARTICIPATING SCHOOL NAME :

PRINCIPAL NAME :

Please accept the following nominations from our school for the inter-school activities to be held at Redbricks School-Santej Campus on **16th and 17th December 2017**.

C1 - Touch and Feel Book Making Competition

Class 1 to Class 3- One team of three participants can be registered (each participant must belong to a different grade)

Sr. No	Student Name	Class	Accompanying Teacher/s
1			
2			
3			

C2 - Twist in a Rhyme- Writing Competition

Class 1 to Class 3 - One Team of Two Participants (each participant must belong to a different grade)

Sr. No	Student Name	Class	Accompanying Teacher/s
1			
2			

C3 - Booker's Quiz (Nano)

Class 4 to Class 6 - One Team of Three Participants (participants can be from any of the three grades)

Sr. No	Student Name	Class	Accompanying Teacher/s
1			
2			
3			

C4 - Poetry Writing Competition

Class 4 to Class 6 - One Team of Two Participants (participants can be from any of the three grades)

Sr. No	Student Name	Class	Accompanying Teacher/s
1			
2			

C5 - Booker's Quiz (Mega)

Class 7 to Class 9 - One Team of Three Participants (participants can be from any of the three grades)

Sr. No	Student Name	Class	Accompanying Teacher/s
1			
2			
3			

C6 - 'Collage' Story Making Competition

Class 7 to Class 10- One Team of Three Participants (participants can be from any of the three grades)

Sr. No	Student Name	Class	Accompanying Teacher/s
1			
2			
3			

W1- Young Readers- Critical Reading Workshop I

14 to 18 years - One or Two participants within this age group

Sr. No	Student Name	Class	Accompanying Teacher/s
1			
2			

W2- Young Readers- Critical Reading Workshop II

10 to 14 years - One or Two participants within this age group

Sr. No	Student Name	Class	Accompanying Teacher/s
1			
2			

W3- Young Writers' Discussion

10 to 18 years - One or Two participants within this age group

Sr. No	Student Name	Class	Accompanying Teacher/s
1			
2			

Kindly Nominate one Teacher Coordinator from your school for this event, whom we can contact for all further coordination.

Name of the Teacher Coordinator: _____

Mobile No.: _____

Email Id: _____

Signature of the Principal: _____

Date: _____