

FORM A

DELAWARE ASSOCIATION OF SCHOOL ADMINISTRATORS  
STUDENT ENTRY FORM FOR ESSAY CONTEST

STUDENT NAME: \_\_\_\_\_

SCHOOL: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

HOME PHONE: OR CELL PHONE: \_\_\_\_\_

COLLEGE NAME: \_\_\_\_\_

COLLEGE ADDRESS: \_\_\_\_\_

COLLEGE STUDENT I.D. # (IF KNOWN): \_\_\_\_\_

To obtain additional copies of this form and other information about this contest, please visit the DASA website: [www.edasa.org](http://www.edasa.org) and click on the link.

*I agree to provide DASA with verification of my acceptance as an education major. I understand that if I receive the award, DASA will make payment directly to the college on my behalf.*

*I declare that the essay I am submitting is entirely my own work. I grant DASA the right to non-commercial publication of my essay.*

STUDENT SIGNATURE: \_\_\_\_\_

.....  
**NOTATION BY DASA ADMINISTRATOR**

The student named above is a bona fide student of this school and, to the best of my knowledge, intends to study education in college immediately after graduation. I have no reason to believe that the essay submitted is not the student's own work.

Print the DASA School Administrator's Name: \_\_\_\_\_

DASA School Administrator Member's Signature: \_\_\_\_\_

Title: \_\_\_\_\_ School: \_\_\_\_\_

***Please submit both forms and the student's essay to:  
DASA, Treadway Towers, 9 E. Loockerman Street, Suite 2B, Dover, DE 19901  
This information must be received in the DASA Office by March 31, 2018.***