

YSU

Press Day

TCJA

2008

Sullivan/Shively

2008

High School Journalist of the Year Award

Adviser Authorization (FORM SS2)

**Please submit this form with the student's application.
STUDENTS ARE NOT TO SEE THIS FORM AFTER IT HAS BEEN COMPLETED.**

PLEASE TYPE OR PRINT LEGIBLY

Please be advised that the following student: _____
has, in my opinion, met all criteria for the Sullivan/Shively High School Journalist of the Year Award.

Student's name: _____

Student's home address: _____

High school: _____

High school address: _____

High school phone number: _____

Adviser's name: _____

Adviser's phone number: _____

Adviser's e-mail: _____

Would you, as adviser, recommend this student for the Sullivan/Shively High School Journalist of the Year Award?

Yes

No

If no, please attach a separate letter explaining your reason(s) why you would not recommend the student.

Entries must be postmarked by March 28 to be considered for awards.