



Junior Section (Grades 6 - 8)

Please return this form as soon as possible. Special Award(s) must be received in the FFFS office no later than February 1, 2008. Awards arriving late will be held for presentation at the 2009 State Science and Engineering Fair.

Donor

Donor/Organization Name: _____

Full name of individual, business, industry, club, or organization offering the award: (NOTE: This is how it will be listed in the Program Book)

Award(s) Classification

Please read the Clarification of Categories inside your Special Awards Pamphlet. (Check Division and Category as Appropriate)

Not Category Specific

Biological Sciences Division

- BE Behavioral and Social
BI Biochemistry
BO Botany
ME Medicine and Health
MI Microbiology
ZO Zoology

Physical Sciences Division

- CH Chemistry
CO Computer Science
EA Earth and Space Sciences
EN Engineering
EV Environmental Sciences
MA Mathematics
PH Physics

TM Team Projects

Award Type

Cash Amount: Savings Bonds Amount *: _____

Plaque Donor Will Provide (must receive by 2/1/7008) FFFS Will Provide (payment for plaque must be included)

Trip: _____

Educational Supplies: _____

Other: _____

Judging Criteria

Award Tied to: First Place Second Place Third Place

Use at FFFS Discretion

Discipline or Special Instructions:

Write or attach a brief description of what the actual award is for the program book.

Blank lines for award description

MORE ON REVERSE

* Winner's name and address will be provided after the Fair

Special Awards Donor Form (Page 2 of 2)

Junior Section (Grades 6 - 8)



53rd Annual State Science and Engineering Fair of Florida

April 16-18, 2008

Lakeland Center, Lakeland

Presenter

Because of the length of the Awards Ceremony, Special Awards **Presenters DO NOT speak to the assembly**. If a Presenter is anticipated, further instructions will be sent **DIRECTLY TO THE CONTACT PERSON** on Award Procedures. A FFFS Board Member will present the award if the Donor is unable to send a Presenter.

Contact Person

Name: _____

Title: _____

Firm/Affiliation: _____

Mailing Address: _____, FL _____
Number and Street City Zip+4

Work Phone: _____ Home Phone: _____

Fax Number: _____ E-mail Address: _____

Judge

Name: _____

Title: _____

Firm/Affiliation: _____

Mailing Address: _____, FL _____
Number and Street City Zip+4

Work Phone: _____ Home Phone: _____

Fax Number: _____ E-mail Address: _____

If you have questions, please contact:

Nancy Besley, Program Director

Phone: 407-207-7839 x2502

Fax: 407-823-6334

E-mail: besleyn@ocps.net

Return Form and Special Award(s) to:

Florida Foundation for Future Scientists

UCF/CECS, PO Box 162993

Orlando, FL 32816-2993

Phone: 407-823-4347

Fax: 407-823-6334