

LONG ISLAND LANGUAGE TEACHERS
STUDENT LANGUAGE COMPETITION

VIDEO AND COMPUTER PROGRAM COVER SHEETS

CIRCLE WHICH APPLIES: _____ **VIDEO**
Competition Name

or COMPUTER PROGRAM

LANGUAGE: _____

LEVEL (Use Roman numerals): _____

DIVISION: _____

TEACHER'S NAME (Circle which applies: Mr., Mrs., Miss, Dr.)

→ → → → → Last Name First: _____

SCHOOL: _____

SCHOOL ADDRESS _____

SCHOOL PHONE () _____ HOME PHONE () _____

TITLE OF THIS ONE VIDEO/COMPUTER PROGRAM: _____

VIDEO ONLY: NUMBER OF STUDENTS IN THIS ONE VIDEO: _____

ALPHABETICALLY LIST THOSE STUDENTS INCLUDED IN THIS
SOLE VIDEO RECORDING.

→ → → LAST NAME FIRST, PLEASE PRINT.

| | | |
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| _____ | _____ | _____ |
| _____ | _____ | _____ |
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| _____ | _____ | _____ |
| _____ | _____ | _____ |

**PAPER CLIP ALL OF YOUR VIDEO AND/OR
COMPUTER PROGRAM COVER SHEETS TOGETHER
AND PLACE THEM WITH YOUR
CASSETTES/COMPUTER CD ROMS and/or 100 MEG.
ZIP DISKS.**

NATIVE SPEAKERS: All native speakers must be registered in the native speaker category.
If not, they will be disqualified.