Delaware Law Related Education Center High School Mock Trial Competition 2020 Essay Writing Contest

Entry Cover Form

YOUR NAME:	
YOUR HIGH SCHOOL:	
CURRENT AGE: CURF	RENT GRADE:
E-MAIL ADDRESS:	
HOME ADDRESS:	
CITY, STATE, ZIP:	
PHONE NUMBER:	
CELL NUMBER:	
CAREER GOAL/INTEREST:	
I hereby certify that I have read and aga Writing Contest and that the written we	ree to abide by the rules of the 2020 Mock Trial ork submitted is entirely my own.
Student's Signature	Date
Signature of Parent or Guardian	

Please submit this Cover Form, along with your submission, on or before midnight on February 14, 2020 to anthonyiannini@dwt.com.