

Application Form
Georgia Science Olympiad New School Grant

School Name _____ County _____

School Address _____

School Phone _____ School Fax _____

Principal's Name _____

S.O. Coach Name _____ Home Phone _____

Coach e-mail address _____

We have read the requirements of the GSO New School Grant program and agree to fulfill the school's responsibilities if our school is awarded a grant. The grant recipient's responsibility is to have a team compete at the assigned GSO regional tournament and not use any of the Grant funds for transportation. The school is expected to provide funds for transportation - the students are not expected to raise funds for transportation. ***If our school does not have a team at their Regional Tournament we are expected to refund the GSO new school grant funds.***

Principal's Signature _____ Date _____

S.O. Coach's Signature _____ Date _____

Also required are:

1. A completed GSO Team Registration Form with the \$65 reduced registration fee.
2. A Statement (max one page double spaced) of why your school desires to participate in the GSO program

Send completed application packets to:

Milton Stompler
Georgia Science Olympiad
Georgia State University
Atlanta, GA 30303-3083

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