WJCT PBS KIDS Writers Contest Entry Form

Please print legibly.
Child’s Name: ________________________________________________________________

Mailing Address: ______________________________________________________________

City/State/Zip: _________________________________________________________________ Phone: (_____)____________________

Grade: Kindergarten 1st Grade 2nd Grade 3rd Grade Age: ______ Gender: F / M

Title of Story: ________________________________________________________________

Number of Words: __________ Word count range: Grades K-1 min. 50 - max. 200
Grades 2-3 min. 100 - max. 350

Number of Illustrations: __________ (minimum of 5)

How did you hear about the WJCT PBS KIDS Writers Contest? (Please

☐ WJCT email ☐ WJCT newsletter ☐ Teacher/school ☐ WJCT-TV
☐ Friend or family ☐ ☐ Other: _______________________________

Submission Check List: (Any submission that does not follow these guidelines, will be disqualified.)

☐ Story MUST include a title page with ONLY author’s first name AND first initial of last name.
☐ Use only one side of the paper.
☐ Number each page.
☐ Do not staple or bind.
☐ Word count range for Grades K-1 is a minimum of 50 words and a maximum of 200 words.
☐ Word count range for Grades 2-3 is a minimum of 100 words and a maximum of 350 words.
☐ All stories must include a minimum of 5 illustrations.

☐ Only one entry per child.
☐ Only single author stories (no co-authors).
☐ Story must be original work of the child.
☐ Story may be fact or fiction, prose or poetry.
☐ Invented spelling is accepted.
☐ Text must be printed/written legibly or typed.
☐ Children who can’t write may dictate their story to be printed or typed.
☐ Non-English text must be translated into English text on the same page.

☐ English text must adhere to the word count.
☐ Word count does not include words on non-story pages (e.g. title page) or those that enhance illustrations.
☐ Story text may be on pages with illustrations or on separate pages.
☐ Original art can include drawings, collages, 3-D, and/or photos taken by the author.

I acknowledge that I have read the Contest Rules & Regulations prior to signing this and I understand the rules.

Required:
Parent/Guardian Signature: ___________________________________________ Date: ______

Printed Name: ___________________________________________ Email: __________________

For office use only.

☐ Data Entered _________ ☐ Received Email _________
☐ Story Scanned _________ ☐ Posted Online Email _________
☐ Uploaded _________ ☐ Results Email _________
**For School Related Entry:**
Teacher Signature: ___________________________ Email: ___________________________

Printed Name: ______________________________

School: ___________________________________

School Mailing Address: ________________________________

City/State/Zip: ___________________________ School Phone: (_____)____________

Deadline for receipt of entries is **Monday, March 15, 2021**

WJCT is not responsible for late, lost, stolen, misdirected, damaged, mutilated, incomplete or illegible entries, or postage-due mail.

WJCT will make every effort, but is not required, to return entries. Stories will be returned only if they are accompanied by a stamped and self-addressed envelope of an appropriate size.

**Mail Entries to:**
WJCT
c/o Writers Contest
100 Festival Park Avenue
Jacksonville, FL 32202

The WJCT PBS KIDS Writers Contest is sponsored and managed by WJCT Public Media.

Thank you to contest sponsors: