

Student full name*

School year group*

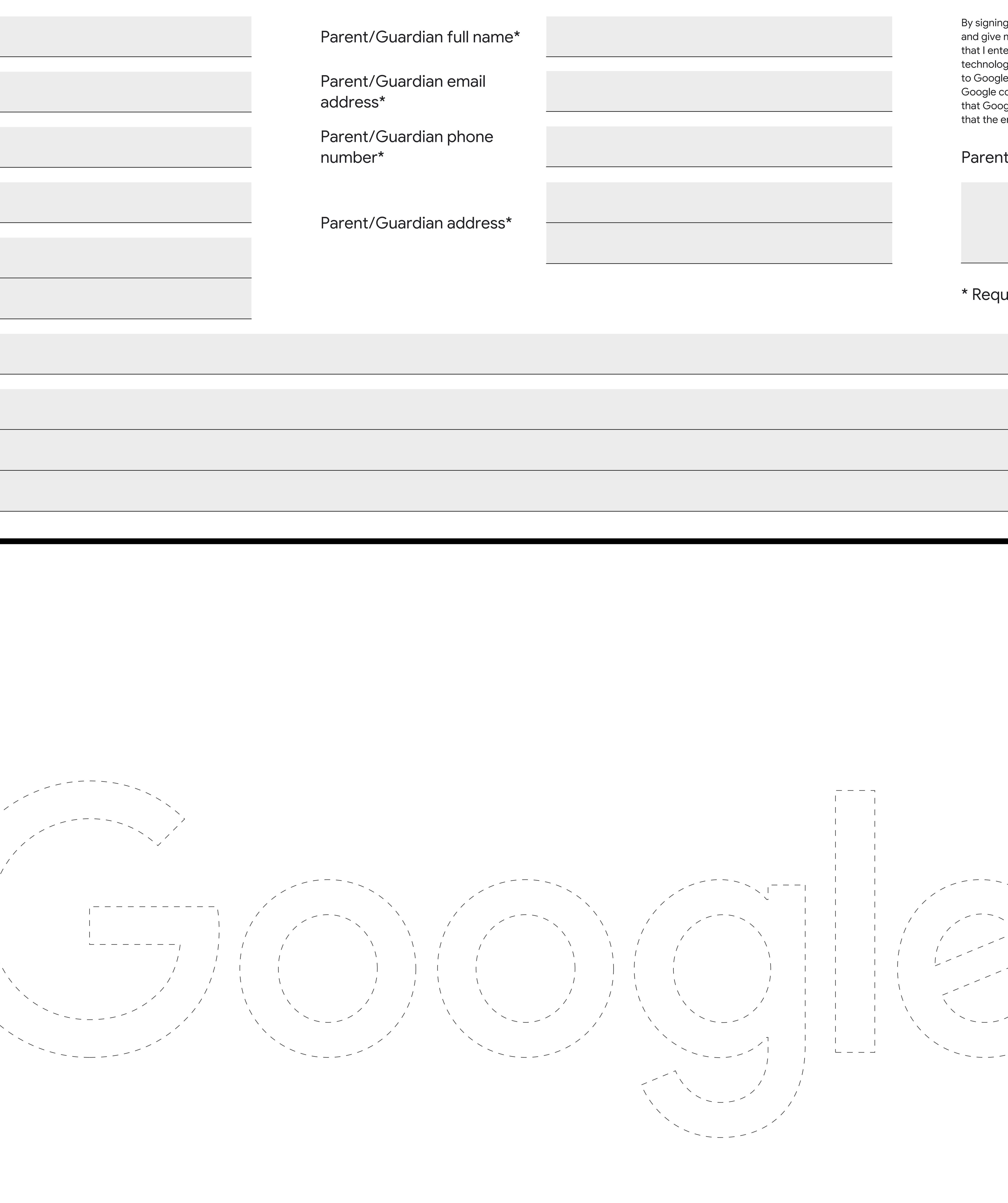
School or nonprofit name*

School or nonprofit phone number*

School or nonprofit address*

Doodle title (10 words max)*

Doodle description (Write a statement about what you drew and how it represents "When I grow up I hope…")



By signing below, I acknowledge that I am a parent/legal guardian of the entrant and give my permission to enter the contest. I understand that the organisation that I enter on the content form is the organization that would receive the technology award if deemed a national winner. The organization will be subject to Google's Giving Policy. I have read and accepted the official Doodle for Google contest rules at doodles.google.com/d4g/rules.html and acknowledge that Google's Privacy Policy located policies.google.com/terms applies. I confirm that the entrant is eligible according to the contest rules.

Parent/Guardian signature*

* Required fields

