2020 ORAL LANGUAGE FESTIVAL – Regional Winner Form

SERIOUS INTERPRETATION – SOLO

Instructions: This form is for use at the regional level only. It is an electronic fillable pdf for ease of completion.

Please type and return this original form by the deadline date of Friday, January 10, 2020 for your region’s participation in the Oral Language Festival on Saturday, February 22, 2020. Each form must be accompanied by a script of the selection to be presented. Late submissions will not be included in the event program.

Please make sure that the entry meets the guidelines of the competition and that this form has been signed by the school principal, and is complete and correct. You may fax the form, attach to an email, or mail hard copy by the deadline date. If the form is signed by the administrator, you DO NOT need to send the original form.

Contact Marcie Frankhouser (661) 636-4239 or Christine Goedhart- Humphrey (661) 636-4330 if you have questions regarding this form.

Region Number: ___________ Regional Contact: ________________________________

Grade Level: □ 4-6th Grade or □ 7-8th Grade

Student’s Name: ____________________________________________________________________________________

Selection Title: ______________________________________________________________________________________

Author: ___________________________________ Publishing Co.: ____________________ Publishing Date: __________

Principal Name: ____________________________ Principal E-Mail: ____________________________

District: ____________________________ School: ____________________________

Coach’s Name: ____________________________ Coach’s E-Mail: ____________________________

School Mailing Address: ______________________________________________________________________________

City: ____________________________ Zip: ____________________________

School Phone: ____________________________ School Fax: ____________________________

This signature verifies that this entry meets the rules and guidelines of the Kern County Oral Language Festival:

School Principal __________________________________________ Date __________________________

Please return this form to:

Office of MARY C. BARLOW
Kern County Superintendent of Schools
Mail To: 1300 17th Street – City Centre, Bakersfield, CA 93301-4533
Attn: Marcie Frankhouser, ELA/HSS Coordinator, 5th Floor
E-Mail To: mafrankhouser@kern.org
Hand Deliver To: KCSOS, City Centre, 1300 17th Street, 5th Floor
Attn: Marcie Frankhouser, ELA/HSS Coordinator
Phone: (661) 636-4645 — Fax: (661) 636-4135
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SERIOUS INTERPRETATION – DUO

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Grade Level:  □ 4-6th Grade or □ 7-8th Grade

Student’s Name: ____________________________________________________________________________________

Selection Title: ______________________________________________________________________________________

Author: ___________________________________ Publishing Co.: ____________________ Publishing Date: ______

Principal Name: ___________________________ Principal E-Mail: ___________________________

District: __________________________________________ School: _______________

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KERN COUNTY SUPERINTENDENT OF SCHOOLS
Division of Instructional Services
Advocates for Children

2020 ORAL LANGUAGE FESTIVAL – Regional Winner Form

HUMOROUS INTERPRETATION – SOLO

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Region Number: __________   Regional Contact: ___________________________________________________________

Grade Level:  ☐ 4-6th Grade or ☐ 7-8th Grade

Student’s Name: ____________________________________________________________________________________

Selection Title: ______________________________________________________________________________________

Author: ___________________________________ Publishing Co.: ____________________ Publishing Date: ______

Principal Name: ___________________________ Principal E-Mail: ____________________________

District: ___________________________________ School: _________________________________

Coach’s Name: ___________________________ Coach’s E-Mail: __________________________

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OFFICE OF MARY C. BARLOW
KERN COUNTY SUPERINTENDENT OF SCHOOLS
Division of Instructional Services
Advocates for Children

2020 ORAL LANGUAGE FESTIVAL – Regional Winner Form

VERSE CHOIR

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Student’s Name: ___________________ Student’s Name: ___________________
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