

D-4287 (08/2024)

Radon Poster Contest Artwork Submission Form

Teacher/Mentor			
Name			
Name of School or Organization			
Phone			
Address	City	State	Zip
Email			
Student			
Name	Grade	Age (must be 9-	14)
Phone			
Address	City	State	Zip
Title (Message) of Artwork			
 Where does radon come from? How does radon get into our homes? Radon can cause lung cancer. Test your home for radon. Please tape this form to the back of the populatity/air-pollution/radon/radon-poster-cor 1-800-768-0362. 		•	. •
I hereby certify that this poster was created enthere are no copyrighted characters used. I all the artwork submitted becomes the property SCDES a non-exclusive license to reproduce, trademark, service mark, patent, trade secrets form is subject to public scrutiny or release. I SCDES publications, websites, video, or film for disclosed to the news media and/or the publicant agree that SCDES will have no control or responsible for their reuse and publication. The grade, and hometown.	so certify that the student me of the South Carolina Depart use, display, and distribute the s, or other proprietary right I r understand and agree the art or promotional purposes with ic in an effort to promote awayer the re-release and use of the	ets the age 9-14 requiment of Environmentals artwork without regards have. Personal infectors may be reproduced attribution. I undestreness of the risks of this image by any medicals.	rements. I understand that all Services (SCDES). I grant ard to any copyright, ormation provided on this ced and used in other arstand that it may be radon. I also understand a outlets and cannot be
Entrant Signature			
Parent/Guardian Printed Name TITLE OF FORM:	Parent/Guardian Signature	 e	Signature Date

Radon Poster Contest Artwork Submission Form

PURPOSE:

The purpose of this form is to accompany artwork submitted to the radon poster contest and give consent for SCDES to use the artwork.

WHO WILL COMPLETE THIS FORM:

The form will be used by students, together with their parents.

ITEM BY ITEM INSTRUCTIONS:

Teacher/Mentor Information

Name: Fill in the name of the teacher or mentor.

Name of school or organization: Fill in the name of the school or organization if applicable.

Phone: Fill in the phone number for the teacher, mentor, or school. Address: Fill in the address for the school or organization if applicable.

Email: Fill in an email address for the teacher or mentor.

Student Information

Name: Fill in the name of the student. Grade: Fill in the student's grade.

Age: Fill in the student's age (must be between 9-14 years). Phone: Fill in a phone number for contacting the student.

Address: Fill in the address number and street for the student's mailing address.

City: Fill in the city for the student's mailing address. State: Fill in the State for the student's mailing address. Zip: Fill in the Zip Code for the student's mailing address.

Title (Message) of Artwork: Fill in the title (message) used in the poster artwork.

Check your topic: Put a checkmark by the *one* topic addressed by the poster.

Entrant signature: (Student) sign on this line to indicate agreement with the consent paragraph above.

Parent/Guardian Printed Name: (Parent or guardian) print name on this line.

Parent Guardian Signature: (Parent or guardian) sign on this line to indicate agreement with the consent paragraph above.

Signature Date: (Parent or guardian) enter the date the form was signed.

OFFICE MECHANICS AND FILING:

The form should be retained until no longer needed for reference: for a period of three years from the submission of the final expenditure report for the grant cycle in which the form was received. The Retention Schedule number is 18245.