

Please	ar	propria	te grade	category	
K-1	2-3 _	4-6	7-9 _	10-12	

STUDENT

First	Middle		Last	
Grade	Age			
Home Address				
City		State	Zip	
Phone ()		_E-mail		
The poster is an	original completed	by the student.		
· · · · · · · · · · · · · · · · · · ·	ived assistance from ease explain on and	-	r materials/ideas from another	
Parent or guardian name	e (printed)			
			strict and the State and National lucational or promotional purposes:	
Signature			Date	
SCHOOL				
School Name				
Please one: Public S	School	Private School	Home School	
Address				
City		State	Zip	
Teacher				
Phone (F-mail		

CONSERVATION DISTRICT

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cooperc@rcgov.us (803) 576-2080

