



Career & Technical Student Organizations Governor's Diversity Day Program Competition

GUIDELINES

- Theme:** **Why Should I Care? Putting an End to Bullying**
- Format:** You decide!! What is the best way to reach your targeted audience? Be creative! (Programs can include, but are definitely not limited to: assemblies, service projects, presentations, awareness campaigns, performances, etc.)
- Target Audience:** You may produce a program intended to reach the members of your organization, the students attending your school or younger students attending a school within your district.
- Program Date:** The 14th Annual Governor's Diversity Day will be held **May 3, 2011**. Students from across the state will be dedicating time to discussing the importance of diversity and ways to put an end to bullying in our schools.
- Eligibility:** Student Career & Technical Organizations at any public school in Kentucky.
- Contest:** An "Outstanding Governor's Diversity Day Program" winner will be selected for each of the Career & Technical Organizations. (i.e. Outstanding Program by an FFA Chapter, etc.). An overall "Outstanding Governor's Diversity Day Program" will also be selected from all entries.
- Summary Entry Deadline:** All entries must be received by the Office of Diversity & Equality by **MAY 12, 2011**. Entries may be mailed, or sent electronically, to the address/email listed on the Entry Form.
- Judging Criteria:** The following categories will be scored by a panel of judges.
1. **Message** (25 points) – How well does the program address the theme?
 2. **Creativity** (25 points) – Is information presented in a creative way?
 3. **Delivery** (25 points) – Is the project delivered in an effective manner?
- Further Information:** If you have any questions, please contact Clinton Morris in the Personnel Cabinet's Office of Diversity & Equality at (502) 564-5313 or Clinton.Morris@ky.gov.



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ENTRY FORM

School: _____

District: _____

Organization: *Please check the appropriate box.*

- | | | |
|--------------------------------|------------------------------------|------------------------------|
| <input type="checkbox"/> DECA | <input type="checkbox"/> FFA | <input type="checkbox"/> TSA |
| <input type="checkbox"/> FBLA | <input type="checkbox"/> HOSA | |
| <input type="checkbox"/> FCCLA | <input type="checkbox"/> SkillsUSA | |

Advisor: _____

President: _____

Targeted Audience: _____

PLEASE ATTACH THE FOLLOWING:

- A **description** of your program (no more than 500 words).
- A **copy** of any materials produced for the program (posters/flyers, brochures, hand outs, program booklets, PowerPoints, videos, etc.).
- A completed **Affirmation of Eligibility Form**.

Also consider attaching any photographs you feel may help illustrate the success of your program!

Forms Due: May 12, 2011

Please Send All Forms To:

Clinton Morris
Office of Diversity & Equality
Personnel Cabinet
501 High Street, 1st Floor
Frankfort, KY 40601

Clinton.Morris@ky.gov



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**AFFIRMATION OF ELIGIBILITY, RIGHTS TO SUBMIT
& RELEASE FORM**

One copy of this document must accompany an entry, read and signed by the faculty advisor responsible for its submission.

By signing this document, you affirm the following:

- I do hereby declare that I have read and understood all contest guidelines.
- I do hereby declare that I have full authority to enter this project into this contest.
- I hereby grant the **Office of Diversity & Equality, the Personnel Cabinet and the Commonwealth of Kentucky** and its agents and assignees full permission and authority to use, publish, and display my project, statements, quotations, testimonials, photographs, designs, and/or any other materials provided by me as part of my entry in the contest, as well as my name, photograph, likeness, and the name of my school and district, without additional compensation, for the purpose of promoting this contest.
- I understand that entries will not be returned. I hereby release the Office of Diversity & Equality, the Personnel Cabinet, the Commonwealth of Kentucky, their agents, employees, licensees and assignees from any claim that I may have, now or in the future, relating to this project.

Faculty Advisor's Signature: _____

Faculty Advisor's Name (print): _____

Student Organization: _____

School/District Name: _____

School Administrator: _____

Date: _____