ENTRY FORM
OHIO ART CRITICISM OPEN, 2020

(Please print information legibly)

STUDENT’S NAME
______________________________________________________________

SCHOOL
______________________________________________________________

ADDRESS
______________________________________________________________

GRADE ___________________ PHONE NUMBER ________________________________

Please identify the artwork that has been selected for critical inquiry. Give the title and artist’s name below.

TITLE
______________________________________________________________

ARTIST’S NAME
______________________________________________________________

The attached art critical inquiry is original writing by the student named above. If work is submitted electronically, signatures are not required but the originality of the work will be assumed.

________________________
Student Signature

________________________
Teacher Signature

________________________
Teacher name (please print)

Please attach this form to the student’s writing, along with a good-quality photograph of the artwork and mail by June 1, 2020 to:

Consultant for Fine Arts
Ohio Department of Education
25 South Front Street, MS #509
Columbus, Ohio 43125-4183
vicky.kelly@education.ohio.gov

Please duplicate this form for multiple entries.

If you are e-mailing entries be sure to include all information on this form.