

Thompson Awards for Western American Writing Coversheet

One Copy of this cover sheet must accompany each Submission.

IMPORTANT NOTE: This is a blind contest. Copies of your submissions **MUST NOT** contain any information that identifies the author (name, e-mail, phone, etc). All pertinent information will be contained on this coversheet.

Name: _____

Student Number: _____

Phone Number: _____

E-Mail Address: _____

Where did you hear about the Contest?

Title of Work: _____

Category (only one box may be checked):

- Fiction
- Poetry
- Non-Fiction
- Narrative
- Special Topic: Immigration

Student Standing:

- Undergraduate
- Graduate

Please initial before each line:

_____ Four copies of my submission are included

_____ My name and student number have been removed from all four copies

I certify that this work has not been published before under my, or anyone else's, name and that I have read the rules and meet the eligibility requirements for the contest.

Author's Signature: _____

Return this form and the manuscripts to:

Center of the American West,
Macky Auditorium, Room 229
282 UCB Boulder, CO 80309

For Office Use Only
Entry No. _____