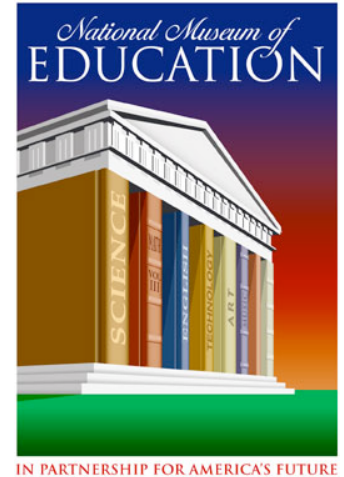


The National Museum of Education™  
Honorary Registry of Students Who Have Made a Difference  
Entrance Form

ST120108

- The National Museum of Education is a 501(c)3 non-profit organization devoted to recognizing and archiving great achievements in American education.
- The Honorary Registry honors American students by recognizing the positive influences they have had in the lives of others.
- Entrants must be or have been a public, private or home-schooled US student, kindergarten through post-secondary, in the US or abroad.
- Registration must accompany a **fully tax-deductible** \$25 cash or check donation.\* Add \$5 for a formal certificate of entry to be sent to you or the student. Credit cards accepted at [www.nmoe.org](http://www.nmoe.org) or at PayPal.com sent to [info@nmoe.org](mailto:info@nmoe.org).
- Make checks payable to **The National Museum of Education**. Mail form with payment and optional photo to:  
*The National Museum of Education  
80 West Bowery St., Suite 305  
Akron, OH 44308*



Please Print

**The Student to Be Honored in the Registry**

Name of Student: \_\_\_\_\_

Gender (circle):      male      female

Level or Grade of the student: \_\_\_\_\_

In what decade(s) is/was this person a student? \_\_\_\_\_

This Student should be entered for... (Check all that apply)

Devotion to studies      Academic success or improvement

Graduation      A specific academic achievement

Assistance to other students

**Student's Contact Information**

Used for informing registrant of his/her entrance into the Honorary Registry. Will not be shared or used commercially.

*Provide if possible:*

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

**The School or Institution the Student Attends or Attended**

School System and/or Name of School: \_\_\_\_\_

*Provide as much information as possible for recognition:*      Email: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Your Contact Info (For donation receipt)**

Full Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Additional Information**

Indicate the name of the registering party as you wish it to appear publicly. Consider using a maiden name.

Registered by: \_\_\_\_\_  
Leave blank to register this student anonymously.

Comments about the student (optional, limited to 100 words):  
\_\_\_\_\_  
\_\_\_\_\_

(may continue on back)

**I would like to add \$5 to my donation amount and have a certificate sent to:**

    \_\_The student      \_\_My address above

**Optional Photograph**

A photo of the student, his/her school, or with his/her class may be attached to this form or emailed with the student's name in the subject line to: [photos@nmoe.org](mailto:photos@nmoe.org)

Hard-copy photos will not be returned.

***Circle how the photo will be sent:***

Email      With Form      No Photo