

Submission Form

by **OCT 15** FINAL SUBMISSIONS TO REACH US!

Kindly fill out the following form that contains your "Story of Change", along with your choice of the documentation (Video / Text & Illustration / Photo & Text / Power point) and post it to us in the enclosed self addressed envelope.

Name of School: _____

Address: _____

School Leader : _____

Name: _____

Tel.: _____ E-mail: _____

Mentor Teacher: _____

Student Information:-

1) Name: _____

Age: _____ Grade : _____

2) Name: _____

Age: _____ Grade : _____

3) Name: _____

Age: _____ Grade : _____

4) Name: _____

Age: _____ Grade : _____

5) Name: _____

Age: _____ Grade : _____

Riverside School
presents

INDIA'S LARGEST
**DESIGN
GIVING**
SCHOOL CONTEST

RIVERSIDE

www.schoolriverside.com
e : designforgiving@gmail.com
t : +91-97126 16125



www.joyofgivingweek.org

NOTE : PLEASE ATTACH THIS SHEET TO YOUR SUBMISSION ENTRY ALONG WITH ANY ONE OF THE FOLLOWING

- Video / YouTube
- Photo and text document
- Power point presentation
- Text and illustration document

SHARE

Tell us your Story?

Give a title to your story of change ? (for example if it's a change story on getting people to wash hands to promote health you might want to title it " Haath Ki Safai".)

The week in which it was implemented _____

1 FEEL

What is the problem you are attempting to change?

2 IMAGINE

List all the ideas generated and the final one

3 DO

What was your final solution and how did it change the situation and yourself. (Do include number of students participating and the number of people impacted)

NOTE : IF YOU RUN SHORT OF SPACE, PLEASE FEEL FREE TO ATTACH EXTRA PAGES.