DEPARTMENT OF FLORIDA

HIGH SCHOOL ORATORICAL CONTEST 2023-2024 CERTIFICATION FORM

ALL OTHER FORMS ARE OBSOLETE AND WILL NOT BE ACCEPTED

THIS SECTION TO BE COMPLETED BY HIGH SCHOOL PRINCIPAL OTHER SECTIONS TO BE COMPLETED BY THEIR RESPECTIVE AMERICAN LEGION ORATORICAL CHAIRS

This is to certify that (contestant full name)	is a student
at	(name of school) located in (name of
city)	and is not undergoing post-graduate
work, is not deficient in any school work for the	current year, and was enrolled in this school
as of December 31, 2023.	
Contestant's Full Printed Name	
oomootani o i an i imee mane	
Contestants Physical Street Address	
Contestant's City and Zip Code	
Contestant's Phone Number	
Contestant's Email	
Parent or Guardian Printed Full Name	
Parent or Guardian Phone Number	
Parent or Guardian Email	
Principal Full Name Printed	
Principal Signature & Date	

THIS SECTION TO BE COMPLETED BY POST CHAIR AND MAILED TO DISTRICT CHAIR

	he winner of this 2023-2024 Post Contest, and is eligible
ATTEST:	SIGNED:
Post Commander	Post Chair
THIS SECTION TO BE COMPLETED BY DISTRICT CHAIR AND MAILED TO AREA CHAIR I,, Oratorical Chair of District # of The American Legion Department of Florida, do hereby certify that was declared by the Judges to be the winner of this 2023-2024 District Contest, and is eligible to represent this District in the Area Contest.	
ATTEST:	SIGNED:
District Commander	District Chair
THIS SECTION TO BE COMPLETED BY AREA CHAIR AND MAILED TO DEPARTMENT PROGRAMS DIRECTOR	
Legion Department of Florida, do he	e winner of this 2023-2024 Area Contest, and is eligible
ATTEST:	SIGNED:

Area Commander

Area Chair