



 Paperboard Packaging Alliance

STUDENT AND SCHOOL CONTACT INFORMATION

(must be completed and submitted with entry)

Please provide contact information for all team members and the faculty advisor on the project. Each team should designate one member to serve as the primary contact on issues related to the 2010 Paperboard Packaging Alliance Student Design Challenge.

PRIMARY STUDENT CONTACT INFORMATION

Name

School Address

School Phone

E-mail

Permanent Address

Permanent Phone

Declared Major

Freshman Sophomore Junior Senior Graduate Student

ADVISOR CONTACT INFORMATION

Faculty Advisor Name

School

Department

School Address

School Phone

E-mail

Provide contact information for all other team members on the following pages

STUDENT #2 CONTACT INFORMATION

Name

School Address

School Phone

E-mail

Permanent Address

Permanent Phone

Declared Major

Freshman Sophomore Junior Senior Graduate Student

STUDENT #3 CONTACT INFORMATION

Name

School Address

School Phone

E-mail

Permanent Address

Permanent Phone

Declared Major

Freshman Sophomore Junior Senior Graduate Student

STUDENT #4 CONTACT INFORMATION

Name

School Address

School Phone

E-mail

Permanent Address

Permanent Phone

Declared Major

Freshman Sophomore Junior Senior Graduate Student

STUDENT #5 CONTACT INFORMATION

Name

School Address

School Phone

E-mail

Permanent Address

Permanent Phone

Declared Major

Freshman Sophomore Junior Senior Graduate Student

STUDENT #6 CONTACT INFORMATION

Name

School Address

School Phone

E-mail

Permanent Address

Permanent Phone

Declared Major

Freshman Sophomore Junior Senior Graduate Student

STUDENT #7 CONTACT INFORMATION

Name

School Address

School Phone

E-mail

Permanent Address

Permanent Phone

Declared Major

Freshman Sophomore Junior Senior Graduate Student