DEPARTMENT OF FLORIDA

HIGH SCHOOL ORATORICAL CONTEST 2024-2025 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

is a student

This is to certify that (contestant full name)	
at	(name of school) located in (name of
city)	and is not undergoing post-graduate
	e current year, and was enrolled in this school
as of December 31, 2024.	
Contestant's Full Printed Name	
Contestants Physical Street Address	
Contestants Physical Otreet 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 Phone Number	
Parent or Guardian Email	
Principal Full Name Printed	
Principal Signature & Date	
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THIS SECTION TO BE COMPLETED BY POST CHAIR AND MAILED TO DISTRICT CHAIR

Legion Department of Florida, do hereby certify that of The American was declared by the Judges to be the winner of this 2024-2025 Post Contest, and is eligible to represent this Post in the District Contest.	
ATTEST:	SIGNED:
Post Commander	Post Chair
THIS SECTION TO BE COMPLETED BY DISTRICT CHAIR AND MAILED TO AREA CHAIR	
I, of The American Legion Department of Florida, do hereby certify that of The was declared by the Judges to be the winner of this 2024-2025 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 here	winner of this 2024-2025 Area Contest, and is eligible
ATTEST:	SIGNED:
Area Commander	Area Chair