



Connecticut Association of Public School Superintendents  
Superintendent / Student Award Recognition Program

Order Form

Today's Date: \_\_\_\_\_

The \_\_\_\_\_ school district wishes to order # \_\_\_\_\_ of Student Awards for distribution during the current school year.

*Certificate, Folder and Gold Seal: \$10.00 each*

*Certificate & Gold Seal: \$5.00 each*

*Folder: \$5.00 each*

*Please note that a check must accompany the order form.*

Requestor information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

**DEADLINE for CAPSS to mail awards by:** \_\_\_\_\_

This order form **MUST** be returned w/check to:

CAPSS  
26 Caya Avenue  
West Hartford, CT 06110  
*ATTN: Dawn*

+CAPSS Office Only+

Rec'd check and mailed awards on: \_\_\_\_\_