Tarkio High School
CLASS OF 2020
AWARDS ASSEMBLY INFORMATION FORM
(Friday, May 8: 1:30-3:00 pm)

Name of SENIOR: _____

Institution/Organization	**Amount**	**Presented by:**

THIS FORM MUST BE COMPLETED & SUBMITTED
TO: MRS. TRACY A. COOPER, COUNSELOR
BY: FRIDAY, MAY 1, 2020