List of participants of education about the Holocaust

School / educational facility:	Teacher / educator:
……..……..……. Name	……..…..…… Name
……..……..……. Adress	……..…… email
.... Citi Country	Responsible for the competition work:
	……..…… Name
……..……..……. email	……..…… email

Date of educational classes:	from hour:	to hour:

Name	Date of birth	Signature

……..…… Signature of the school manager

……... Signatures of the teachers / educators