



Lemelson Young Inventors Challenge ENTRY FORM

NAME: _____ GRADE: _____

SCHOOL: _____ TEACHER: _____

Name of Invention _____

Where did you get the idea for your invention? _____

Explain how your invention works. _____

Who will benefit from your invention? _____

Why do you think your invention is unique and original? _____

MODEL OF INVENTION:

*A model of your invention should be constructed. Your model **DOES NOT** need to actually work or be a prototype; it should represent your invention idea. Use everyday materials from around your home or school. Please label your invention clearly and have Your Name and the Invention Name on the model. All Models must be secured to either the Display Board or attached to the front of the Display Table.*

DRAWING OF YOUR INVENTION:

Please draw your invention in the space provided below. Be sure to label all parts. You may use pencil, pen, ink, crayons, markers, etc (can even be computer generated).