

2026 New Jersey Science Olympiad Regional Tournament Team List

TWO SIGNED COPIES MUST be submitted at check-in on the day of the tournament to participate

Team Number:		School:	
--------------	--	---------	--

	STUDENT'S NAME	GRADE
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		

	ALTERNATE'S NAME	GRADE
1.		
2.		
3.		

DIVISION B TEAMS ARE LIMITED TO FIVE (5) NINTH GRADE STUDENTS

DIVISION C TEAMS ARE LIMITED TO SEVEN (7) TWELFTH GRADE STUDENTS

I certify that all of these above students are active members of our school, the grade levels are appropriately indicated and that ninth-grade students are on only one team's roster. (9th grade students may not appear on both a Division B team and a Division C team)

PRINCIPAL'S SIGNATURE _____ DATE _____

I certify that all constructed devices for this tournament were built by members of this school's 2026 New Jersey Science Olympiad team.

HEAD COACH'S SIGNATURE _____ DATE _____

	COACH'S NAME	CELL PHONE NUMBER
Head Coach		
Assistant Coach		
Assistant Coach		
Assistant Coach		