



## 24-HOUR OSS WEBDEV CONTEST 2009 CONTEST ENTRY FORM

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### 1. Contact info:

Name of contest team: .....

Contact address: .....  
.....  
.....

Contact person: .....

Contact email: .....

Contact phone: ..... Fax: .....

Open group       Student group from institute of higher learning

### 2. For student group only:

Name of institute: .....

Dean/Supervisor: .....

I agree that this team will represent my school to participate in the **24-Hour OSS WebDev Contest 2009** and fully abide to the contest terms and conditions.

.....  
Institute's official stamp

.....  
Signature of Dean/Supervisor  
Name:  
Date :

**3. Contest team:**

No.	Role	Name	MyKAD No.
1	Team leader	Email:	
2		Email:	
3		Email:	
4		Email:	
5		Email:	

*\* Contest team must be formed by 2 to 5 people.*

**4. What will the team use in the contest?**

Programming language: .....

Development tools: .....

.....

.....

Database : .....

Web server: .....

**5. Please answer the following question (for shortlisting evaluation):**

Why OSS is important to you? (maximum 200 words)

Closing date for Contest Entry Form submission: **20 October 2009**.

Announcement of shortlisted contest teams: **23 October 2009**.

Contest date: **4 November 2009**.

Please fax the completed Contest Entry Form to 03-83193206 or email to [mygosscon@oscc.org.my](mailto:mygosscon@oscc.org.my) or send to the following address:

24-HOUR OSS WEBDEV CONTEST 2009  
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