

Kravis Concept Plan Competition Waiver of Confidentiality

I/We, _____,

waive confidentiality of this concept plan for the sole purpose of judging for the Kravis Concept Plan Competition.

Name of Individual Submitting Waiver:

Signature of Individual Submitting Waiver:

Date:

Name of Concept Plan:

Name of College/University you Attend/ed:

Year of Graduation (or Expected Graduation):

Contact Information (Primary Contact on Team)

Name (First and Last):

Email:

Phone:

Mailing Address:

How did you learn about the competition?

What encouraged you to submit a concept plan to the competition?