

EDGAR HIGH SCHOOL ALUMNI HALL OF FAME

NAME OF NOMINEE	DATE
YEAR OF GRADUATION FROM EDGAR HIGH SCHOOL	
NOMINEE PERMANENT ADDRESS	
NOMINEE PHONE NUMBER	
NOMINEE EMAIL ADDRESS	
CURRENT TITLE (OR TITLE AT TIME OF RETIREMENT) _	
NOMINATED BY	
ADDRESS	
EMAIL & PHONE #	
DOES NOMINEE KNOW HE/SHE HAS BEEN NOMINATED?	
POST SECONDARY EDUCATION:	
SCHOOL(S)	
DEGREE(S)	
SIGNIFICANT CONTRIBUTION (fill in where applicable; may a	ttach additional information):
BUSINESS	
JOB RELATED	
CAREER ADVANCEMENT	
EDUCATION	
SERVICE	
PERSONAL: FAMILY HISTORY, ETC. (optional)	

^{*}Form due by May 15. Two 3.5" x 5" vertical current color photos must accompany nomination form.*