

Hamburg Area School District Alumni  
Academic Hall of Fame  
Nomination Form

Nominee Information

Name \_\_\_\_\_

Contact Address \_\_\_\_\_

Phone # \_\_\_\_\_ Year of Graduation \_\_\_\_\_

Job Title and Employer (if applicable) \_\_\_\_\_

Photographs if available High School yes/no Current yes/no

Post High School Education

<u>Institution</u>	<u>Dates Attended</u>	<u>Major</u>	<u>Degree</u>
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- 1.
- 2.
- 3.

Honors/Awards/Accomplishments

College

Professionally

Professional or Civic Organizations and Positions Held

Elected Positions

Community Activities

This alumnus of Hamburg Area School District should be selected for the Academic Hall of Fame because:

Signed \_\_\_\_\_ Printed Name \_\_\_\_\_  
Date \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Please return to Superintendent of Schools, Hamburg Area School District, 701 Windsor Street, Hamburg, PA 19526 by January 31<sup>st</sup>.