

**Crestview Local School District
Distinguished Alumni Hall of Fame**

NOMINATION FORM

Name of Nominee: _____ Date: _____

Address: _____

Phone: _____ Email: _____

Year of Graduation: _____ **(OR)** Years of Service to School/Community: _____

Current Position (If deceased, please write deceased): _____

Reason for Nomination: _____

Nominees are scored in the following categories based on achievement(s) and/or contribution. Detail all of the nominee's qualifications in the following categories. If a category does not apply simply place an N/A on the line. (Please use a separate sheet if necessary.)

1)Agricultural: _____

2)Community: _____

3)Education: _____

4)Sports: _____

5)Medicine: _____

6)Science: _____

7)Political: _____

8)Other: _____

(**Applications will stay on file and be reviewed annually for future consideration.)

Name: _____ Address: _____

Phone Number: _____ Email: _____

Send completed form, supporting documents and any photographs to:
Crestview D.A.H.O.F, Herman Miller, President, 44100 Crestview Road, Suite C, Columbiana, OH 44408