



## **Distinguished Alumni Hall of Fame**

Please review the selection criteria and instructions carefully and complete both pages of this form. Print clearly.

### **Selection Criteria**

1. Must have graduated at least five years before being considered for election.
2. Must be a person of good character demonstrating high moral standards, and be a positive role model.
3. Should have attained stellar achievement, active community or national involvement, and received significant honors and awards.
4. A respected leader in his/her profession. Involved in career-related activities.
5. Must have contributed significantly through his/her professional or personal life to the betterment of society.

**Name of Nominee:** \_\_\_\_\_ **Year Graduated** \_\_\_\_\_

**Is this person deceased? Yes No** (please circle one). **If deceased, when?** \_\_\_\_\_

**Category of Nominee** (check all that apply)

\_\_\_\_\_ Medical/Health    \_\_\_\_\_ Science/Technology    \_\_\_\_\_ Visual or Performing Arts

\_\_\_\_\_ Literature    \_\_\_\_\_ Entertainment    \_\_\_\_\_ Business/Finance    \_\_\_\_\_ Government/Politics

\_\_\_\_\_ Education/Humanities    \_\_\_\_\_ Other (specify) \_\_\_\_\_

**On a separate page, please describe in detail the accomplishments and other pertinent information that would help determine this person's selection into the Distinguished Alumni Hall of Fame. For our Hall of Fame committee to provide the most thorough consideration of your nominee, please include as much information as possible! (Facts, figures, special honors, contributions, or other material which will be of assistance to the selection committee.)**

**Letters submitted by other persons who can provide supporting information on this nominee are also welcome and encouraged!**

**Contact information for nominee/nominee’s family: (please print clearly)**

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Nomination submitted by: (please print clearly)**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Are you a graduate of LHS? Y N If yes, year of graduation: \_\_\_\_\_

How are you acquainted with your nominee? (Friend? Family member? Classmate? Teacher? Colleague?) How long have you known him/her for? Anything else you wish to share is always helpful!

Is this nominee aware that you are nominating them for the honor? Y N

**Hall of Fame nominations are accepted by LREF on a rolling basis.**

**The Lakewood Hall of Fame Induction Ceremony takes place in April.**

**Candidates will be considered for selection by the HOF Committee during late spring/early summer and those that are chosen will be notified by fall of the year prior to the next induction ceremony.**

**Submit:**

Preferred method: via email to: [terri.richards@lakewoodcityschools.org](mailto:terri.richards@lakewoodcityschools.org) Please use “Hall of Fame Nomination” in subject line. Questions: Email or call 216-529-4033

If your nominee is selected, you will receive notification via email. Thank you for your interest in the Hall of Fame and your support of this nominee!