

Morristown West High School Hall of Fame  
2019 Nomination Form

Nominee's Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (Day) \_\_\_\_\_ (Cell) \_\_\_\_\_

Category (Circle):     *Athlete/Student*     *Teacher/Coach*     *Alumnus*     *Contributor*

**1. Athlete/Student**

a. Year graduated \_\_\_\_\_

b. College attended \_\_\_\_\_

**c. Please circle all that apply:**

Lettered                      All-Conference                      All-State                      All-American

Merit Scholar                      National Scholar                      A/P Scholar

Other Recognition (please specify) \_\_\_\_\_

d. Sports/Clubs \_\_\_\_\_

e. Other Qualifying Information: \_\_\_\_\_

**2. Alumnus**

a. Year graduated \_\_\_\_\_

b. Reason for nomination (regional or national acclaim since graduation)  
\_\_\_\_\_  
\_\_\_\_\_

**3. Teacher/Coach**

a. Sport(s) coached and years \_\_\_\_\_

b. Classes taught and years \_\_\_\_\_

c. Reason for nomination \_\_\_\_\_

**4. Contributor (Administrator, Faculty, Fans, etc)**

a. Years affiliated with Morristown West \_\_\_\_\_

b. Reason for nomination \_\_\_\_\_

Nominee is currently (position, title, employer, etc) \_\_\_\_\_

**\*\*Please attach copies of any other information (press clippings, pictures, etc) you may have available.  
Return nomination paperwork by July 31, 2019.**

Your name \_\_\_\_\_ Email \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (Day) \_\_\_\_\_ (Cell) \_\_\_\_\_

FOR COMMITTEE USE ONLY

Date nomination was received: \_\_\_\_\_ By: \_\_\_\_\_