



# Dodgeland Alumni Hall of Fame

## Nomination Form

Due March 1st

Nominee: \_\_\_\_\_

Graduation year: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Describe why you feel this nominee is worthy of this honor (You may attach additional material):

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Nominated by: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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