



# Aurora High School Alumni Association Hall of Fame NOMINATION FORM

Select One  Educator/Administrator  
 Staff Member (Secretary, Custodian, Bus Driver, Librarian, etc.)

Candidate's Name \_\_\_\_\_

Position(s) \_\_\_\_\_

If Coach: Sport(s) \_\_\_\_\_

If Teacher: Subject(s) \_\_\_\_\_

Grade Level \_\_\_\_\_

Building(s) \_\_\_\_\_

Candidate Address \* \_\_\_\_\_

Or \_\_\_\_\_  
(City) (State) (Zip)

Candidate Email \* \_\_\_\_\_

(Note: Either the Candidate's Address or Email is required)

Candidate Phone Number \_\_\_\_\_

**Nominating Statement.** Please provide a substantial statement (150 – 300 words) explaining why the person you are nominating is deserving of this recognition per the category criteria. Additional pages acceptable.

Nominators Name \_\_\_\_\_

Alumni \_\_\_\_\_ (Year of Graduation \_\_\_\_\_), Current or former Administrator \_\_\_\_\_, Current or Former Teacher/Staff member \_\_\_\_\_, Community member \_\_\_\_\_.

Your Address \_\_\_\_\_  
Street City State Zip

Your Email \_\_\_\_\_

Your Phone Number \_\_\_\_\_

I would be willing to provide testimonial at the Induction Ceremony or help secure another person to do so.  
 Yes  No