

CUYAHOGA HEIGHTS SCHOOL
ALUMNI HALL OF FAME

NOMINATION FORM

Category of Nomination (check one)

- Academic/Career Major Contributions to the Cuyahoga Heights School
 Athletic Special Honorary Achievement
 Cultural/Performing Arts

Name of Nominee _____ Phone No. _____

(Include maiden name where applicable)

Address _____

Year of Graduation (must be at least 10 years prior to present) _____

Activities while at Cuyahoga Heights School: _____

Professional Education/Activities/Organizations: _____

(Continue on reverse side if necessary)

Describe in Detail Reasons for Nomination: _____

(Continue on reverse side if necessary)

Your Signature: _____

Address _____

Date: _____ Phone Number: _____

Send completed form to:
Cuyahoga Heights School Alumni Association
4820 East 71st. Street. Cuyahoga Heights Ohio 44125-1095

