

St. Charles West High School Hall of Fame

Alumni Nomination Form

(Nomination Forms must be received by August 1st)

Name of Alumni _____

Year of Graduation _____

International or National Recognition _____

Contribution to SCW during and/or after attendance _____

Community Service/Involvement _____

Professional Success _____

Lost life in service to country:

Military Branch _____

Years of Service _____

Date Deceased _____

Name of Nominator (Print)

Phone Number

Signature of Nominator