

DATE OF SUBMISSION: _____

Application Form for Nomination to the
“Wall of Pride for Distinguished Alumni, Community Members and Educators”

Dansville High School Shared Decision Making Team and the Foundation for Dansville Education

Section I - This section of the form applies to the **Nominee**

Name of Nominee	<input type="checkbox"/> posthumous nominee	Graduating Class DHS:
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Address of Nominee

Town/City	State	Zip
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Tel (home)	Tel (work)	Tel (mobile)
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Email Address(es)

Nominee's Employer (if known)

Employer Address (if known)

Description of Nominee's current work, endeavor, retirement and if applicable, date of Nominee's death. (You may include nominee's resume , bio or general information.)
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General Description of Nominee's achievements warranting this nomination.

State several (5 preferred) reasons in support of this nomination

Please feel free to attach a letter or any other supporting documents with this nomination form.

Mail to: Foundation for Dansville, 337 Main Street, Dansville, N.Y. 14437

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“Wall of Pride for Distinguished Alumni, Community Members and Educators”

Dansville Central School Shared Decision Making Team and the Foundation for Dansville Education

Section II - This section applies to the person making the nomination: **Nominator**

Name of Nominator	Graduating Class DHS:
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Address of Nominator

Town/City	State	Zip
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Tel (home)	Tel (work)	Tel (mobile)
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Email Address(es)

Nominator's relationship to Nominee

Names and addresses of three (3) people supporting the nomination

Supporting person #1	Email
Telephone (mobile)	Telephone (other)
Email	
Supporting person #2	Email
Telephone (mobile)	Telephone (other)
Email	
Supporting person #3	Email
Telephone (mobile)	Telephone (other)
Email	

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