



## ***Brush Alumni Association Wall of Achievement Nomination Form***

### **Purpose of the WALL OF ACHIEVEMENT**

To recognize and honor graduates of Charles F. Brush High School who have displayed outstanding achievement in areas such as leadership, service to the community, service to Brush High School, humanitarianism, creativity, courage, and careers which have benefited others! Brush High School teachers who may not have graduated from the high school may also be nominated. Honorees may be living or deceased, but there will be no more than one deceased honoree per induction.

Please print or type in black ink:

Nominee's Name: \_\_\_\_\_

If you are nominating a Brush High teacher, you do not need to complete the entire application. Please turn to the bottom to page 2.

Name on Brush High Diploma: \_\_\_\_\_

Year of Graduation: \_\_\_\_\_

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

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

Phone No. \_\_\_\_\_

e-mail address: \_\_\_\_\_

**Undergraduate Education:**

College/University: \_\_\_\_\_ Degree: \_\_\_\_\_

Year of graduation: \_\_\_\_\_

**Graduate/Professional Education:**

College/University: \_\_\_\_\_ Degree: \_\_\_\_\_

Year of Graduation: \_\_\_\_\_

Profession: \_\_\_\_\_

Employer: \_\_\_\_\_

Positions Held: \_\_\_\_\_

Military Service: \_\_\_\_\_

Branch: \_\_\_\_\_ Dates: \_\_\_\_\_

Rank: \_\_\_\_\_

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**Important**

The following must be completed for both alumni and teachers who are being nominated:

Using the criteria presented (leadership, service to the community, etc.), please explain the accomplishments of the nominee which you believe would make him or her an excellent candidate for the Brush High Alumni Wall of Achievement.

Please use a separate sheet of paper. You may also submit newspaper clippings, published articles, video tapes, or other information to demonstrate the nominee's accomplishments.

For teachers who are being nominated, please provide the following information:

Course (or subject) taught by the nominee: \_\_\_\_\_

Year in which the course was taught (ex. 1956-57): \_\_\_\_\_

**Nomination submitted by:**

**Name:** \_\_\_\_\_

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

**Phone Number:** \_\_\_\_\_

**e-mail address:** \_\_\_\_\_

**Application must be filled out completely to be considered for review.**

**Please return the completed nomination form by May 15, 2009 to:**

**Brush Alumni Association  
5044 Mayfield Road  
Lyndhurst, Ohio 44124  
(216) 691-2108**