

## **GRAVETTE HIGH SCHOOL**

## Athletic Hall of Honor

Nomine	ee Name:			
Address:		City:	State:	Zip:
Phone:		Email:		
	Complete all categories than ng service to school or over		gible 8 years following g	raduation or 5 years
1.	All State/All Conference:_		Year Graduated:	
	College attended and year	rs attended:		
	Sport(s): All State or All Conference was earned:			
	Sport(s) Participated:			
	Other information that qualify this nominee for the GHS Hall of Honor:			
2.	Teacher, Coach, Administr			
3.	Reason for nomination:  Distinguished Service, Outstanding Civic Achievement, Outstanding Contributions, Volunted or Outstanding Post High School Academic and/or Professional Career:			
Name o	of person making nomination		Date:	
Addres	s:	City:	State:	Zip:
Phone:		Email:		
Also inc	clude as many of the follow	ing as possible: 1. Resu	me 2. Newspaper article	es(s) 3. Additional

Also include as many of the following as possible: 1. Resume 2. Newspaper articles(s) 3. Additional letters of recommendation 4. Special recognition 5. Awards 6. Etc.

Please return completed form (Deadline of April 30) with the items mentioned above to: Gravette Athletic Director, 325 Lion Dr. S. Gravette, AR 72736 or email information to andrew.vire@gravetteschools.net