



# HALL OF DISTINCTION NOMINATION FORM

*Honoring Academic and Athletic Achievement*

**PURPOSE:** To recognize those former students, alumni, faculty, and staff who have made outstanding contributions in their career, academic, or athletic achievements.

**ELIGIBILITY:** Any student who has attended Camp Lejeune/Lejeune High School for a minimum of one year. A faculty or staff member must have a minimum of 15 years of uninterrupted affiliation with the high school. If a faculty or staff member joined the high school in mid-career and departed before obtaining the 15 years of uninterrupted affiliation, that person would not become eligible for nomination until they had been removed from the system five years after their tenure at the high school.

**NOMINATION FORM MUST BE  
RECEIVED BY 11:59 AM ON DECEMBER 1**

When you complete the form please email, **ALONG WITH ANY DOCUMENTATION** to: [lejeunealumni@gmail.com](mailto:lejeunealumni@gmail.com)

## nominee information

CATEGORY OF NOMINEE (CHECK ALL THAT APPLY):  STUDENT  COACH  FACULTY  STAFF

YEAR(S) AT CLHS/LHS (yyyy -yyyy)

IF A STUDENT, YEAR OF GRADUATION (yyyy)

GRADUATE OF CLHS/LHS?

Yes  No

FIRST NAME

MIDDLE NAME

LAST NAME

MAIDEN NAME

IS NOMINEE DECEASED?

Yes  No

IF DECEASED, DATE OF DEATH (mm/dd/yyyy)

IF DECEASED, PLEASE ADD LINK TO OBITUARY (IF AVAILABLE)

ADDRESS

CITY

STATE

ZIP

HOME PHONE

MOBILE PHONE

EMAIL ADDRESS

## your information

FIRST NAME

MIDDLE NAME

LAST NAME

MAIDEN NAME

ADDRESS

CITY

STATE

ZIP

HOME PHONE

MOBILE PHONE

EMAIL ADDRESS

YOUR YEAR OF GRADUATION

GO TO NEXT PAGE TO COMPLETE FORM



## **nominationstatement**

Please describe (in narrative form) the contributions this nominee has made to CLHS/LHS, or through career achievements, that lead you to make this nomination. Please attach supporting documentation (i.e. awards, newspaper articles, letters, photos, etc) as well as a photo of the nominee. Give as much documentation as possible.

**PLEASE TYPE YOUR NARRATIVE:**