

**UPPER PERKIOMEN ATHLETIC DEPARTMENT
WALL OF FAME
INDUCTION NOMINATION FORM**

Name of Nominee: _____

Current Address: _____

Phone: () _____ Year of Graduation from UPHS: _____
(if applicable)

College (s) or Post High School Education

<u>Institution</u>	<u>Dates</u>	<u>Major/Courses</u>	<u>Degree</u>
--------------------	--------------	----------------------	---------------

Honors or awards received:

High School:

College:

Professionally:

Community Activities:

Other Activities Worthy of Mention:

Occupation (if applicable)

Job Title:
Employer:

Professional Organizations and Positions Held:

<u>Organizations</u>	<u>Positions</u>	<u>Date</u>
----------------------	------------------	-------------

Civic Organizations and Positions Held:

<u>Organizations</u>	<u>Positions</u>	<u>Date</u>
----------------------	------------------	-------------

Elected Positions:

<u>Positions</u>	<u>Dates Held</u>
------------------	-------------------

I believe this individual should be considered because:

Signature of Nominator: _____ Phone: () _____
(Must be signed in order to be included in the nominations)

Please return to: Upper Perkiomen High School,
 Attn: Robert Kurzweg III, CMAA, Athletic Director
 2 Walt Road, Pennsburg, PA 18073
 DUE DATE: March 31, 2019