



**College of Arts and Sciences
Alumni Hall of Fame Recognition Program**

Alumni Hall of Fame Nomination Award

Nominee Name: _____

Nominee Address: _____

Nominee City, State, Zip: _____

SIUE Grad Year: _____ Major(s): _____

Additional Degrees: _____

Daytime Phone: _____ Home Phone _____

E-mail: _____

Employer: _____ Title: _____

Work Address: _____

City, State, Zip: _____

Please describe accomplishments and successes achieved by the nominee in his/her chosen field(s) of study (all areas do not have to be filled in):

Please describe the positive impact by the honoree in his/her chosen field of study:

Please list any awards and/or recognition the honoree has received:

Please list the honoree's community involvement and activities:

Please describe any involvement the honoree has had with SIUE following graduation:

Please describe any additional support of higher education following graduation:

Nominator's Name: _____

Nominator's Address: _____

Nominator's City, State, Zip: _____

Daytime Phone: _____ Cell Phone: _____

Email: _____

Signature: _____ Date: _____

Please include one letter of recommendation for the nominee.

Additional pages may be added as needed.

**Nominations may be mailed, e-mailed or faxed.
Nominations are due to the College of Arts and Sciences by June 5, 2009.**

**Mail nomination form to:
SIUE College of Arts and Sciences
Attn: Grant Andree
Campus Box 1608
Edwardsville, IL 62026-1608
E-mail nomination form to gandree@siue.edu
Fax nomination to (618) 650-5050 to the attention of Grant Andree**

