Bellevue High School
Halls of Excellence Nomination Form

Name of Nominee: _____Class of _____

Address: _____Living: _____
Deceased _____

City: _____State_____Zip_____

Telephone Number: (home)_____(cell)_____

REASON FOR NOMINATION

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

(Use back side if needed)

Nominated by:_____

Address: _____

City _____State_____Zip_____Phone_____

Date:_____

Mail to:

Bellevue High School Principal
c/o Halls of Excellence Committee
200 Oakland Avenue
Bellevue, OH 44811

FOR OFFICE USE ONLY

DATE RECEIVED BY COMMITTEE:

_____

COMMITTEE REVIEW DATE

_____