

ZEPHYR GRADUATE OF DISTINCTION NOMINATION FORM

Whitehall-Coplay School District

I. Nominee Information

Name of Nominee: _____ Year of Graduation: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Category of Achievement (Check all that Apply):

- | | |
|---|--|
| <input type="checkbox"/> Academic Achievement | <input type="checkbox"/> Civic and/or Military Service |
| <input type="checkbox"/> Music | <input type="checkbox"/> Community Service |
| <input type="checkbox"/> The Arts | <input type="checkbox"/> Personal Achievement |

Please describe in detail the accomplishments/achievements of the above nominated individual. List all outstanding accomplishments, including any personal service and/or achievements of note to the community.

II. Nominator Information

Name of Nominator: _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Email:** _____

Check all that Apply:

- | | |
|---|--|
| <input type="checkbox"/> Graduate of WHS | <input type="checkbox"/> Current District Employee |
| <input type="checkbox"/> Current Resident of District | <input type="checkbox"/> Former District Employee |
| <input type="checkbox"/> Former Resident of District | |

Signature of Nominator:

_____ **Date:** _____

Mail to:
Dr. Barbara Chomik
Director of Curriculum and Instruction
Whitehall-Coplay School District
Administration Office
2940 MacArthur Road
Whitehall, PA 18052