Hall of Fame Nomination Form

## I would like to submit the following alumnus/alumna to the Hall of Fame Committee for consideration:

Nominee:				
	First Name	Middle	Last	Maiden Name (if applicable)
Address: _				
	Street		City	
-	State			Zip
PHONE NUMB	ER:			
	Day		Evening	
Email:				
Degree Program:				
Year Degree Awar	rded:			

## **INSTRUCTIONS FOR THE NOMINATOR:**

Complete this nomination form as the cover sheet for submission. See detailed criteria and instructions on the nomination webpage.

Nominated by:											
Address:											
	Street		City		State	Zip					
	Phone			Email							
	1.1										

Nomination form and other nomination materials should be submitted by email to grad@ncat.edu with "Hall of Fame Nomination" included in the subject line

North Carolina A&T State University • The Graduate College 1601 East Market Street • 120 Gibbs Hall • Greensboro, NC 27411 Phone: (336) 285-2366 • Fax: (336) 334-7282 • email: grad@ncat.edu