



DISTINGUISHED ALUMNI AWARD Nomination Form

Faribault Public Schools

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NOMINEE: \_\_\_\_\_ GRADUATION YEAR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

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NOMINATED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

If this nominee is deceased, please include the name, address, phone, and email information of a family member we may contact:

\_\_\_\_\_

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**Please provide as much information as possible to assist the Selection Committee in choosing award winners.**

DESCRIBE CAREER PATH AND SPECIAL INTERESTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

LIST SERVICE AND CIVIC ACTIVITIES AND ORGANIZATIONS:

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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LIST SPECIAL AWARDS, RECOGNITIONS, AND HONORS:

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WHAT ELSE WOULD YOU LIKE TO TELL US ABOUT YOUR NOMINEE?

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**Please submit completed nomination form along with any accompanying documents (optional) to:**

**Faribault Falcon Distinguished Alumni Award**

c/o Jill Fagerlund  
701 E. Division St.  
Faribault, MN 55021

For questions or more information:  
Email: [jfagerlund69@gmail.com](mailto:jfagerlund69@gmail.com)

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