



**Springfield High School 50 Plus  
Wall of Fame Nomination**

**Name:** \_\_\_\_\_

**SHS Year of Graduation:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Land/Cell or both Phone Number:**  
\_\_\_\_\_  
\_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Reason for recognition:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Nomination Submitted by:** \_\_\_\_\_

**Land or Cell Number:** \_\_\_\_\_

**Contact Kimberlie Humphrey 330-606-8998 or Tom Clafin 330-606-8105 for questions**