

Brush Alumni Association Wall of Achievement Nomination Form

Purpose of the *WALL OF ACHIEVEMENT*

To recognize and honor graduates of **Charles F. Brush High School** who have displayed outstanding achievement in areas such as leadership, service to the community, service to Brush High School, humanitarianism, creativity, courage, and careers which have benefited others. Brush High School staff members who may not have graduated from the high school may also be nominated. Honorees may be living or deceased, but there will be no more than one deceased honoree per induction.

Please print or type in black ink. Form has been designed to be printed, and completed by hand, OR you can tab through the fields to complete the form.

Date nomination is being completed:

Date nomination received in Alumni Office:

Nominee

Nominee's Name: _____

Address: _____

City, State, Zip Code: _____

Phone Number(s): Home _____

Mobile _____

E-mail address: _____

If you are nominating a Brush High staff member, you do not need to complete the entire application. You can omit page 2 and continue page 3.

Name on Brush High Diploma: _____

Year of Graduation: _____

Undergraduate Education

College/University: _____

Degree(s): _____

Year of graduation: _____

Graduate / Professional Education

College/University: _____

Degree(s): _____

Year of graduation: _____

College/University: _____

Degree(s): _____

Year of graduation: _____

Profession / Career (Brief description. Further information can be included with justification.)

Profession(s): _____

Employer(s): _____

Position(s) held: _____

Nomination Justification

The following must be completed for nominated alumni and staff members.

Using the criteria presented (leadership, service to the community, career accomplishments, etc.); please explain the accomplishments of the nominee which you believe would make him or her an excellent candidate for the *Brush High Alumni Wall of Achievement*.

You may also submit newspaper clippings, published articles, video tapes, or other information to demonstrate the nominee's accomplishments.

Nomination Justification



Important (for nominated Brush staff members)

For Brush staff members who are being nominated, please provide the following:

If a teacher, course(s) (or subjects) taught by the nominee:

If not a teacher, what position(s) did the nominee hold?

Year(s) of employment at Brush (ex. 1956-57):

Nomination submitted by

Name: _____

Address: _____

City, State, Zip Code: _____

Phone Number(s): Home _____

Mobile _____

E-mail address: _____

Application must be filled out completely to be considered for review

To be considered for induction in the fall of a given year, nomination form must be completed and submitted by March 1 of that year. Nominations received after March 1 will be held for consideration the following year. All nominations not chosen remain active and are considered in future years.

Submit nominations to:

Brush Alumni Association
5044 Mayfield Road
Lyndhurst, Ohio 44124
(216) 691-2108
brushalumniassociation@gmail.com

revised db 10/7/25