

**Oak Ridge R-VI School District
2017 HALL OF FAME AWARD NOMINATION FORM**

NOMINEE INFORMATION

Date: _____

Name: _____

Current Address: _____

Home phone#: _____

Cell phone #: _____

Email Address: _____

Other Contact Information: _____

Local Oak Ridge Area Contact of Nominee:

Name: _____

Phone #: _____

Year graduated from Oak Ridge: _____

Or

Years of service to Oak Ridge Schools and in what position(s):

NOMINATOR INFORMATION

Nominated by: _____

Home phone#: _____

Current Address: _____

Cell phone#: _____

Email Address: _____

Other Contact Information: _____

Provide the following information in typed form:

Items for Consideration of Award:

1. How has the nominee demonstrated a strong work ethic?
2. How has the nominee been a positive role model for peers and others?
3. How has the nominee exemplified a spirit of generosity and selflessness?
4. Provide a listing of the nominee's professional, career, and/or life accomplishments.

Submit completed form and recommendation to: lseyer@oakridge.k12.mo.us or

**Lisa Seyer
Oak Ridge R-VI School District
4198 State Highway E
Oak Ridge, MO 63769**