MALDEN HIGH SCHOOL ALUMNI ASSOCIATION HALL OF FAME NOMINATION FORM

1. Information about the person you are nominating (please print or type): First Name -----Last Name -----Year of Graduation from MHS -----Current Address ------Email Address-----**Telephone Number -----**2. Category of Nomination (please check one) Arts -----Business-----Community Service -----Education -----Government -----Media-----Military-----3. Outstanding Achievements - (please list) 4. Qualifications - To assist the Hall of Fame Selection Committee in their decisionmaking, please attach a brief narrative (one page or less) that expands on the specific qualities and qualifications of this nominee. 5. Name of person making the nomination: First Name ------Last name-----Current address-----_____ Best telephone number -----Email address if applicable-----

Nomination forms may be mailed to MHSAA, P.O. Box 47, Malden, MA. 02148,

or they may be emailed to Diane Lind at dlind420@verizon.net.