

HALL OF FAME NOMINATION FORM

NOMINEE CONTACT INFORMATION:					
Name of Nominee		Date of Birth (& Date of Death)			
Company Name		☐ Architect			
Phone		☐ Contractor			
E-mail		Building Highway Utility Specialty □ Engineer			
		☐ Other(Ex. Supplier, Insurance, etc.)		
Company Street Address: City, State ZIP Code		High School Attended and Graduation Year			
Company Mailing Address: City, State ZIP Code		Spouse's Name (if applicable)			
Birthplace		Children's Names (if applicable)			
Parent's Names					
POST SECONDARY EDUCATION					

Please attach a list of all schools attended and years of completion along with any degrees and/or certifications earned.

CAREER NARRATIVE

Please attach a short narrative of the Nominee's career from the first job in the industry until present. Include the following information:

- 1. Accomplishments: significant awards, honors, recognitions.
- 2. Significant Projects: include those important to the Nominee that might not otherwise be considered significant.
- 3. Community Involvement: include all national, state and local affiliations as well as any charitable involvement/leadership.

STATEMENT OF SUPPORT

Please attach a brief statement of support for the nominee.

NOMINATED BY:				
Name		Company Street Address: City, State ZIP Code		
Company Name		Company Mailing Address: City, State ZIP Code		
Phone		Email		
Signature		Date		