## Parsippany Hills High School Hall of Fame Nomination Form

## NAME OF NOMINEE:

First	(Maiden)	Last
Nominee's Address:		
Nominee's Phone Number:		
Year of Graduation:		
If staff member, position at	PHHS:	
PLEASE PROVIDE THE FOLLO	OWING ALONG WITH THIS FORM:	
	nee's accomplishments (not to exceed rting documentation (not to exceed th	
Name of Nominator:		
Nominator Phone and E-Ma	il:	
Relationship to Nominee:		
Signature	Date	

Form must be received by January 31st Mail to:

Susan A. Bonnet
Parsippany Hills High School
20 Rita Drive
Morris Plains, N.J. 07950