



Holy Spirit High School

Hall of Fame

Nomination Form

Nominee Information:

Name _____

Address _____

Phone Number _____ Date _____

Email Address _____

Year of Graduation or Years of Association with Holy Spirit _____

Please list post graduate accomplishments (space available on 2nd page):

Educational

Professional

Community Service

Spiritual

School Spirit

Nominated By: _____

Name _____

Phone Number _____ Date _____

Email Address _____

Signature _____

Comments _____

Return Application To:
Holy Spirit High School
Director of Institutional Advancement
500 New Road * Absecon, NJ 08201
609-646-3000 ext. 310

Educational

Professional

Community Service

Spiritual

School Spirit

(any additional information please attach)