

# Saltsburg Schools Foundation

## Distinguished Alumni Award

### Nomination Form

#### ***Nominee Information***

Name (please indicate maiden name when applicable) \_\_\_\_\_

Year of Graduation \_\_\_\_\_ City/State of Current Address \_\_\_\_\_

#### ***Nominator Information***

Your Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**Please state how the candidate has been an exemplary model for others, particularly for youth, impacting their lives and inspiring them to have a positive impact on society.**

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**Please provide any additional reasoning for your nomination. E.g., nominee's education, training, profession, and/or work history; honors or awards received; volunteerism; personal characteristics; etc.**

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Nominations will be shared at SSF meetings, and the board of directors will vote to determine candidates chosen for this award.

**Return this completed form to: SSF PO Box # 1 Saltsburg, PA 15681**