



**GARRETT COLLEGE DISTINGUISHED ALUMNI AWARD
CLASS OF 2019 NOMINATION FORM**

Name of Nominee (Legal Name): _____

Nickname: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Year(s) Affiliated with Garrett College: _____

Is nominee being honored posthumously? No Yes Date of Death: _____

If yes, name of person who would accept the award: _____

Contact information: _____

Photo included? No Yes

COMPLETE THE FOLLOWING:

- *I place before the committee the aforementioned Alumni for consideration for the Garrett College Distinguished Alumni Award for the following reason(s).*

- *Please describe any special contributions to Garrett College by the Nominee:*

- *Please describe the Nominee's academic accomplishments during their collegiate career:*

- *Explain any professional accomplishments and/or civic involvement of the Nominee after leaving Garrett College:*

Nominator's Name _____

Address _____

City _____ **State** _____ **Zip** _____

Phone _____ **Email** _____

Signature _____ **Date** _____

All nominations must be received by no later than **February 1, 2019** to be considered for the current year's class. Supporting material may accompany Nomination Forms. Completed forms should be submitted to:

GC Distinguished Alumni Selection Committee
c/o Garrett College Foundation
687 Mosser Road
McHenry, MD 21541