

**PASSAIC VALLEY HALL OF FAME NOMINATION FORM**

NAME OF CANDIDATE \_\_\_\_\_

ADDRESS OF CANDIDATE \_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

YEAR OF GRADUATION FROM PASSAIC VALLEY \_\_\_\_\_

SPORT(S) PLAYED or COACHED  
\_\_\_\_\_

COACH OR COACHES PLAYED FOR  
\_\_\_\_\_

REASONS FOR NOMINATION \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Continue on another paper if necessary. A typed response will also be acceptable.*

HONORS/ACCOMPLISHMENTS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NOMINATOR NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

Please return form to: Passaic Valley High School, c/o Mr. Joe Benvenuti, Athletic Director  
& Hall of Fame Committee Chairperson  
100 East Main Street, Little Falls, New Jersey 07424

Email to: [benvenutij@pvhs.k12.nj.us](mailto:benvenutij@pvhs.k12.nj.us) or Fax to: 973- 890-2583

**ALL NOMINATIONS ARE DUE BY JULY 19<sup>TH</sup> , 2019**