



NOMINATION FORM

Please submit to Dr. Patrick Scarpello, SHS Athletic Director
pscarpello@summit.k12.nj.us Fax 908-918-2127

Name of Nominee:	
Year of Graduation from SHS:	
Dates resided in Summit:	
College Attended and Year of Graduation:	
Year left Pro or AAU Ranks:	
Individual Awards:	
Individual Statistics/Achievements:	
Championship Teams played on:	
Contact person in relation to nominee (Name, Phone, Email):	
Additional Comments useful to Nominating Committee:	

Summit High School Athletic Hall of Fame
 c/o Athletic Director, Summit High School
 125 Kent Place Blvd., Summit New Jersey 07901