

# **Allen College Alumni Association Hall of Fame Nomination Application**

**Name of nominee:**

Their address:

Their phone number:

Year(s) graduated from Allen College (or its predecessor schools):

**Contributions to Institution:**

Please state how this person has brought honor to our school through his or her actions. Please include how they have contributed to and supported nursing and healthcare education.

**Achievements:**

Please list their achievements in nursing or volunteer work along with their professional and vocational achievements.

**Community Contributions:**

Please state how this person contributed to education, his or her local community, and/or church.

Signature \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone Number \_\_\_\_\_

\*Please note that if your nominee is selected, you maybe be asked to introduce them at the Alumni Reunion on Saturday, April 14, 2018.

Nominations may be mailed to:

Beth Sullivan  
Alumni Relations Coordinator  
Allen College  
1825 Logan Ave  
Waterloo, IA 50703

Nominations may also be emailed:

[Beth.Sullivan@unitypoint.org](mailto:Beth.Sullivan@unitypoint.org)

Please call (319) 226-2016 if you have any questions.

Please have nominations submitted by March 23, 2018