



Italian Hall of Fame/Special Recognition Nomination Form

Please return to: GRIAA P.O. Box 1915 Rockford, IL 61103

Additional comments and supporting documentation may be included on supplemental pages.

I would like to nominate: _____
(Last Name) (First) (Middle)

Address: _____
(Number & Street) (City) (State) (Zip)

Business Address: _____
(Number & Street) (City) (State) (Zip)

Phone Numbers: _____
(Home) (Business)

Occupation, Profession, or Title: _____

Company Associated with: _____

Overall Impact on Italian American Community:

Major constructive achievements:

Date	Achievements
_____	_____
_____	_____
_____	_____

Major constructive achievements:

Date	Achievements
_____	_____
_____	_____
_____	_____

Major constructive achievements:

Date	Achievements
_____	_____
_____	_____
_____	_____

Nominator name: _____
(Last Name) (First) (Middle)

Address: _____
(Number & Street) (City) (State) (Zip)

Phone Numbers: _____
(Home) (Business)