

# Loganlea Legends Hall of Fame Nomination Form

Name of nominee:		Date:	
Phone:			
Email:			
Address:			
Association with Loganlea SHS: E.g., Teacher, Ex-student, Ex-parent etc.			
Name of person submitting application and relationship with nominee: E.g., Friend, Student, Parent etc.	Name:	_____	
Contact details (phone, email and address):	Phone:	_____	
	Email:	_____	
	Address:	_____	
	_____		
Please give a detailed description of why this individual is being nominated (years of service – start and end date, actions, character traits etc.)			
Please attach or label any other documents of achievements to support the candidate's consideration.			

Forms are due by COB Friday 6 September, Week 9, Term 3, 2024. Forms can be handed to the office or emailed to [principal@loganleashs.eq.edu.au](mailto:principal@loganleashs.eq.edu.au)

**PLEASE NOTE:** Before submission, please make sure you have read the attached information as nominees will only be considered if they have met such requirements. Thank-you.