

**NOMINEE FOR WHC COALINGA ALUMNUS OF THE YEAR
RECIPIENT**

NOMINATED YEAR: 20_____

NAME: _____ MAIDEN NAME: _____

BIRTHDATE: _____ CONTACT TELEPHONE: _____

ADDRESS: _____

EMAIL ADDRESS: _____

YEAR GRADUATED FROM WEST HILLS COLLEGE: _____

EDUCATION ACCOMPLISHMENTS (*LIST INSTITUTION, DEGREE, DATE RECEIVED*):

1. _____
2. _____
3. _____

PROFESSIONAL ACCOMPLISHMENTS:

1. _____
2. _____
3. _____

(Additional information may be included on a second page if needed)

PROFESSIONAL AFFILIATIONS: _____

COMMUNITY SERVICE: _____

REFERENCES (*LIST NAME, ADDRESS, PHONE, EMAIL*):

1. _____
2. _____

PERSON NOMINATING: _____ PHONE: _____

REVIEWED BY: _____ DATE: _____

Return form by March 30 to:

WHC Coalinga
President's Office
300 Cherry Lane
Coalinga, CA 93210