

CMEA Hall of Fame Nomination Form

Nominee's Name: _____
 Address: _____
 Home Phone: _____
 Name of school district
 and/or name of college: _____
 Teaching Field(s): _____
 Current Status: Active Retired Deceased (dates: b: ____ d: ____)

Please be sure to attach a good photograph.

Has the nominee:	YES	NO
A. Been a member of Colorado Music Educators Association?	_____	_____
B. Demonstrated excellence in teaching or music education? (Please attach examples of this excellence.)	_____	_____
C. Brought about significant events or substantive improvements in the educational process? (Please attached examples of events or improvements.)	_____	_____
OR		
D. Contributed significantly to the betterment of the profession through exemplary service or acts?	_____	_____
E. Demonstrated the highest ideals and professional integrity during the time of service?	_____	_____

Print name of sponsoring institution, organization or individual Telephone

Signature Position Date

Address City State Zip

Return this form postmarked no later than October 20, 2009 to:

Michelle Ewer
 6736 Union Street
 Arvada, CO 80004