DISTINGUISHED ALUMNI AWARDS NOMINATION FORM

AWARD DATE: ________________________________

YOUR NAME

NAME OF PERSON YOU ARE NOMINATING

NOMINEE'S TITLE

NOMINEE'S COMPANY

NOMINEE'S MAILING ADDRESS

CITY

STATE

ZIP

WORK PHONE

HOME PHONE

E-MAIL

FAX

AWARD NOMINATED FOR: □ YOUNG ALUMNI □ DISTINGUISHED FRIEND □ DISTINGUISHED ALUMNI

REASON BEING NOMINATED

YEAR OF GRADUATION

DEGREE

(PLEASE ATTACH A COPY OF THE NOMINEE'S PROFILE AND LETTERS OF RECOMMENDATION)

YOUR SIGNATURE

DATE

MAILING ADDRESS

CITY

STATE

ZIP

WORK PHONE

HOME PHONE

E-MAIL

FAX

Please mail or fax this form to:
University of Memphis Alumni Association
Alumni Center
Memphis, TN 38152

Fax: (901) 678-3035
Phone: (901) 678-2586
E-mail: alumnievents@memphis.edu