LEHIGHTON EDUCATION & ATHLETIC
FOUNDATION

GRADUATES OF DISTINCTION WALL OF HONOR NOMINATION APPLICATION

Today's Date: _____

Name of Nominee: _____

Maiden name (if applicable): _____

Year of Graduation: _____

Street: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Occupation: _____

Accomplishments While at Lehighton Area High School: _____

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_____

Accomplishments in Occupation: _____

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_____

Service to Community: _____

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_____

Contributions to Humanity: _____

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_____

Special Awards: _____

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_____

Resume of Additional Information to Support this Person's Nomination:

_____

_____

_____

_____

Personal Profile (married/single, children/ages, places lived, college, etc.)

_____

_____

_____

_____

Your Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Date: _____ Signature: _____

Send application to: Lehighton Education and Athletic Foundation
ATTN: Awards Selection Committee
P.O. Box 370
Lehighton, PA 18235

Applications must be postmarked by March 1, 2026.