



**Society of Sharonville Honored Citizen  
NOMINATION APPLICATION**

Nominee: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Age: \_\_\_\_\_ Female\_\_\_\_ Male\_\_\_\_\_

*Feel free to attach information to this form.*

Pertinent Background Information: (ie Spouse's Name, Children, employment, education, organizations, offices held, affiliations, accomplishments ect. )

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Outstanding, Beneficial or Noteworthy Accomplishments for the City of Sharonville.

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Nominator: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Please return to: Sue Knight, City of Sharonville 10900 Reading Road, Sharonville OH 45241