



WALL OF HONOR APPLICATION



*Edgerton Local School District
111 E. River Street, Edgerton, OH 43517
Phone 419-298-2112*

Please provide the following information:

- Applicant Legal Name _____
- Rank _____
- Applicant's year of graduation from Edgerton High School _____
- 1) For verification of service, submit an official photograph of the applicant in uniform.
2) **OR** a copy of enlistment/certification or discharge documentation, if a photograph is not available.
Note: Pictures will be digitally scanned and returned via U.S.P.S. to the address listed below.

Completed applications may be mailed to the address listed above, dropped off at the high school office or emailed to wallofhonor@edgertonschools.org

- Applicant's service (including unit and theater of deployment, if applicable)
(Example - US Army 5th Special Forces Group, Ohio Highway Patrol, Edgerton Fire Department, etc.)

- Applicant's years of service 9/11/2001-9/12/2004 or 2001-2004, etc. _____

POINT OF CONTACT

- Applicant name
- Relative

Name _____

Phone _____ Cell _____

Address _____ City _____

State _____ Zip _____ Email _____

Office Use Only:

Date Application Received _____ *ELS Employee Receiving Application* _____

Applicant Committee Notes _____
