

**COMMUNITY ACADEMY WORKSHOP | WALNUT HILL**

n o m i n a t i o n   f o r m

**To be completed by student**

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Email \_\_\_\_\_

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**To be completed by teacher**

How long have you known this student? In what capacity?

\_\_\_\_\_  
\_\_\_\_\_

What is your assessment of your student's talent and potential in this art area?

\_\_\_\_\_  
\_\_\_\_\_

What would you like your student to gain from this experience/opportunity?

\_\_\_\_\_  
\_\_\_\_\_

We welcome any additional comments and thoughts you feel would be helpful to us.

\_\_\_\_\_

Signature \_\_\_\_\_

Name \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

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