# Walton High School
# Hall of Fame Application 2027

**Full Name:**_____

**Street Address:**_____

**City:**_____ **State:** _____ **Zip:** _____

**Telephone Number:** _____

**Weighted GPA:**_____ **Number of Community Service Hours:** _____

**Awards/Achievements/Accolades (Attach document if additional space is needed)**

| Name | Year(s) |
|---|---|
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**Clubs/Sports/Organizations (Attach document if additional space is needed)**

| Name | Year(s) |
|---|---|
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**Industry Certifications**

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**Write a short paragraph sharing what it means to be a Walton Brave:**

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**Applicant Signature**