



Military Service Wall of Honor at SWMHS

Name of Serviceman/
Servicewoman: _____

Branch of Military Service: _____

Rank: _____

Dates of Service: _____

Years of Attendance at S.W.M.H.S. _____

Photo attached: 5x7 _____ 8 x 10 _____

All questions should be directed to: eileen.giovenco@sayrevillek12.net
Eileen Giovenco (732-525-5250) or Kelly Nakielny (732-525-5283)