

GARY SPORTS HALL OF FAME NOMINATION FORM

PLEASE TYPE OR PRINT

1. Candidate's Name _____
(Last Name) (First) (Middle) (Maiden) (Nickname)

2. Home/Cell Phone _____ Work Phone _____ E-Mail _____

3. Address _____
(Street) (City) (State) (Zip)

4. Birth _____
(Date) (Place) (Date of Death)

5. High School _____
(Year of Graduation) (School Name) (City & State)

6. High School Athletic Record (Please list team or individual regular season and post-season record, by year; list individual stats, summarize records and awards.)

7. High School Coach: Name _____

Address _____

8. Colleges Attended: _____
(Year) (Degree) (Field) (College)

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9. Suggested category of nominee: Coach _____ Player _____ (please check one)

10. College Athletic Record (Please list team or individual regular season and post-season record, by year; list individual stats, summarize records and awards.)

11. College Coach: Name _____

Address _____

12. Sports Achievements (since graduation from high school and/or college) _____

13. High School and College Extra-Curricular Activities: _____

14. Employment since graduation (list yrs.) (Coaches – please fill out year by year and your record at each school)

15. Present Position: _____

Company: _____

Address: _____

16. Military Service Record _____

17. Clubs and Memberships _____

18. Civic Organizations _____

19. Marital Status (Name of Spouse) _____

Home Town _____ **State** _____

20. Children (List Names and Year of Birth) _____

21. Hobbies _____

IMPORTANT!

PLEASE ENCLOSE 2 CURRENT PHOTOS OF THE CANDIDATE, AND AT LEAST ONE CANDID OR ACTION PHOTO OF THE CANDIDATE FROM THEIR PLAYING OR COACHING DAYS.



This page is to be completed by the High School, College, Organization, or Individual Submitting the Application.

PLEASE TYPE OR PRINT

1. Individual or Organization _____

2. Address _____
(Street) (City) (State) (Zip)

3. Present Occupation _____

4. Athletic Affiliation _____

5. Supplemental Documentation: Please submit 2-5 clippings, programs, or other printed materials that document some of the records and achievements listed herein. Letters of recommendation from peers (maximum of 3) are also appropriate.

(Signature of person making nomination) (Date)

(Note: If additional space is needed, please use a plain sheet of white paper, 8½ × 11 inches, write on one side only, preferably typewritten.)

RETURN TO:

**Gary Sports Hall of Fame
Nominations Committee
P.O. Box 641267
Gary, IN 46401
Phone: (219) 201-3658
Email: garysportshalloffame@yahoo.com**

**NOMINATIONS ARE DUE BY NOVEMBER 1st TO BE ELIGIBLE FOR THE FOLLOWING CALENDAR YEAR
CONSIDERATION
(example: due November 1, 2022, for eligibility in 2023)**