

# Nomination Form

**Instructions:**

All information on this form must be completed. Include with this nomination form:

- 1) a minimum of two (2) and a maximum of four (4) letters of recommendation explaining why you think this individual is worthy of this honor. Please limit each letter to ONE typewritten page. Letters of recommendation for other awards or honors should not be used as a substitute for this requirement.
- 2) photocopies (8 1/2" x 11") of not more than six (6) of the following: newspaper clippings, magazine articles, event programs, or other such materials that detail information about the nominee's accomplishments (DO NOT SEND ORIGINALS). Please do not use notebooks with plastic sheet protectors or highlighters to point out specific facts; either underline or draw arrows to mark copy.
- 3) a current portrait-type photograph of the nominee. Please include names on all photos. **NOTE:** All information submitted shall be retained by the League and all actions necessary to the selection process shall remain confidential.

**NOTE:** The Hall of Fame Induction Ceremony will be held in the Fall of 2021

Return the completed nomination form and support materials before or not later than **April 1, 2021** to:

MSHSL Hall of Fame Director  
2100 Freeway Boulevard  
Brooklyn Center, MN 55430-1735

**Please check appropriate nomination category:**

- |   |  |
|---|--|
| <input type="checkbox"/> Fine Arts                  | <input type="checkbox"/> Administrator     |
| <input type="checkbox"/> Participant                | <input type="checkbox"/> Athletic Official |
| <input type="checkbox"/> Director/Coach             | <input type="checkbox"/> Coach             |
| <input type="checkbox"/> Adjudicator                | <input type="checkbox"/> Athlete           |
| <input type="checkbox"/> Activity/Athletic Director | <input type="checkbox"/> Contributor       |

**Hall of Fame Nominee:** \_\_\_\_\_

(first, middle, last)

Address: \_\_\_\_\_

(street address – city, state, zip)

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

Place/Date of Birth: \_\_\_\_\_

Cell: \_\_\_\_\_

Date of Retirement: \_\_\_\_\_

Email: \_\_\_\_\_

Is the nominee still active in any area of activities other than the category for which he/she is being nominated?

Yes  No If yes, please explain: \_\_\_\_\_

If Deceased, Date of Death: \_\_\_\_\_

Name of spouse or closest living relative: \_\_\_\_\_

Address: \_\_\_\_\_

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

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

**Schools Attended:**

High School

City and State

Year Graduated

College/University

City and State

Year Graduated

Degree

Post Graduate School

City and State

Year Graduated

Degree



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3. Professional affiliations and achievements (i.e. involvement in state and national coaching/fine arts associations and other related professional organizations. Please include length of service, committee membership, offices held).

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4. Other information (not previously listed) that substantiates the nominee's accomplishments.

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<b>Individual Submitting Nomination</b>	
Name: _____	Home: _____
Phone: _____	Cell: _____
School: _____	Street Address: _____
PO Box, City, State, Zip Code _____	
Email: _____	
Signed: _____	Date _____