

STOCKTON ATHLETIC HALL OF FAME NOMINATION FORM

Athlete	Coach	Administ Benefacto		Team	Support Staff	Family	Other
PERSON .	MAKING NON	MINATION:					
Name:						Date: _	
Address:				City:		State:	Zip: _
Phone:	Home			Cell			
Signature	:						
NAME OI	F CANDIDATI	E/TEAM:					
Name:						Date:	
Address:				City:		State:	Zip: _
D1	II			Ca11			
Phone:	Home			Cen			
Date of B	irth:			_ Birthplace: _ Names of 0	Children:		
Date of B Name of Note:	irth: Spouse: If nominee is dec	eased, please giv	e names	Birthplace: Names of 0 and addresses of r	Children:elatives who migh	nt have informatio	n on the nom
Date of B Name of Note:	irth: Spouse: If nominee is dec	eased, please giv	e names	_ Birthplace: _ Names of 0	Children:elatives who migh		n on the nom
Date of B Name of Note: Nominee School A	irth: Spouse: If nominee is dec	eased, please give	e names a: Fr	Birthplace: Names of C and addresses of r rom:	Children:elatives who migh	nt have informatio u:	n on the nom
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Name of Boundaries Nominee School A Element High Schoolmur College/	irth: Spouse: If nominee is dec resided in the ttendance ary: hool: nity College:	eased, please give	e names	Birthplace: Names of Cand addresses of r rom: Location: Location: Location: Location: Location: _	Children:elatives who migh	u: From: From:	n on the nom Thru: Thru: Thru: Thru:

NOMINATION INFORMATION

- 1. Complete Nominee, Team, or Family Information on Nomination form. Special Note: With nomination of Team or Family, please include names, addresses, phone #s for the Selection Committee.
- 2. Along with nomination, write a brief cover letter that summarize nominee, team, or family accomplishments for the Selection Committee's review.
- 3. Submit a chronological outline that profiles nominee, team, or family accomplishments, honors and highlights. This includes dates, organization, team, etc.
- 4. Must include a good quality photograph of nominee, team, or family that is current or during competition time.

IMPORTANT – ALL APPLICATIONS WILL
ONLY BE CONSIDERED AND REVIEWED
BY THE SELECTION COMMITTEE WITH
A QUALITY GLOSSY PHOTOGRAPH

- > Selection committee preference is color picture; however, will take black/white.
- > Supplement or support documentation can be requested by Selection Committee.

Send all completed forms and mail to:

Stockton Athletic Hall of Fame 1776 West March Lane Suite 170 Stockton, CA 95207