## **UCHS Athletic Hall of Fame Nomination**

Qualifications: Players/coaches associated with UCHS athletics 5 years after participation/service; contributors/volunteers are eligible immediately. Anyone can nominate an individual. An anonymous 7-member committee will vote on nominations. Forms must be received by Nov. 1st to be considered for that year's election. (Please feel free to attach additional paper and information if necessary)

Name of Candidate:	
Address:	
Phone:	
Day	Evening
Year(s) of Graduation/Employment/Asso	ociation in UC Athletics:
Sports participated in/coached/associated	with at UCHS (include years)
Why should this person be considered for	r the UCHS Hall of Fame?
Share with the committee any accomplish justified for consideration to be inducted	nments, on and off the field, that you feel are into the Hall of Fame:
	nmendation, from a non-family member, who plishments and character of the candidate.
Name of Nominator (Your name):Phone #	
Drop off or send completed forms to: UCHS Athletic Dept. 410 Patriot Blvd	

Liberty, Ind. 47353 Phone: (765) 458-5808

Fax: (765) 458-5430