



Athletics Hall of Fame Nomination Form

Name of Nominee: _____

Male: _____ Female: _____

Current Address: _____

Home Phone: _____ Cell Phone _____

Email: _____

Nomination Category:

() Former SPS Athlete

Year of Graduation: _____ School: _____

Sport(s): _____

() Team (to be considered for induction in 2020)

Year of Graduation: _____ School: _____

Sport(s): _____

() Former Coach/Administrator/Sport/Title/ (to be considered for induction in 2020)

Position Held: _____

Years of Service: _____

() Contributor/Donor (to be considered for induction in 2020)

Significant Contributions to the SPS Athletic Program:

Rationale for Nomination:

