

TRIMBLE LOCAL SCHOOLS ATHLETIC HALL OF FAME

Date Prepared_____

Name of Nominee_____

Home Address_____

City_____ State_____ Zip_____

Telephone Home or Cell ()_____ Work ()_____

E-Mail_____

If deceased, date and place of death_____

Name of spouse or closest living relative_____

Relationship_____

Home Address_____

City_____ State_____ Zip_____

Telephone Home or Cell ()_____ Work ()_____

Children_____

High School School(s) Attended_____

Year Graduated_____

High School Diploma or Equivalent (circle one)

Sports (please list number of years of each participation and varsity letters earned for each sport)

Additional sports information (honors, etc.)_____

College(s) Attended_____

Year(s) Graduated_____ Degree(s)_____

Sports (please list number of years of each participation and varsity letters earned for each sport)

Additional sports information (honors received, etc.)_____

Other Education/Training_____

DOCUMENTATION IS HIGHLEY RECOMMENDED FOR THE COMMITTEE TO MAKE A DECISION. Example newspaper articles, old football programs, athletic banquet programs, information from OHSA website.

Person recommending the nomination_____

Address_____

City_____ State_____ Zip_____

E-Mail_____

Mail completed form to:
Trimble Athletic Hall of Fame Committee
C/o Principal
Trimble Local High School
One Tomcat Drive
Glouster, OH 45782
Website- trimble.k12.oh.us