## **OVERLAND ATHLETIC HALL OF FAME NOMINEE FORM**

PLEASE TYPE		DEADLINE:			
Name					
First	Nickname	ickname Last			
Current Address					
Street	City		State	Zip	
Phone/Area Code:					
Check Appropriate Category:					
Student Participant		Administrator			
Coach		Volunteer			
Individual Submitting Nominat	ion Information:				
Name:		Phone/ <i>F</i>	Area Cod	e:	
Address:					
City, State, Zip:					
Relationship to Nominee:					
Signature:		Date Submitted:			
Name of an individual who can moves forward:	provide additional pe	ertinent informa	tion if sci	reening committee	
Name:		Phone:			

## **GENERAL CRITERIA**

- 1. The nominee must have been involved with an Overland sport in the category for which he/she is nominated.
- 2. The nominee must have demonstrated outstanding abilities and contributions in the category for which nominated.
- 3. The nominee must have demonstrated high moral character, outstanding citizenship and the ideals embodied in the mission of Overland High School that includes the building of character, promoting cooperation, and achieving excellence.

HISTORY OF ATHLETIC INVOLVEMENT				
Athletic Activity	Status (Ex: Student)	Start Year	Graduation Year	Total Years
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Briefly list Achievements, Contributions, or Impact on Overland Athletics

ninee's objectiv t Overland, if kn	ecords in spo	rt and contrib	utions as a le	eader during	his/he

Local, State, national honors and involvement in local, state, and national associations, in years beyond Overland, if known.
Please email or mail Nomination Forms to Athletic Director at Overland High School between April 1 and October 1 annually.