



Division II Athlete Hall of Fame NOMINATION FORM

Guidelines for nominating a candidate for DII Athlete Hall of Fame

1. Any current USTFCCCA member may nominate a qualified Cross Country and/or Track & Field athlete as a candidate.
2. To nominate, a member must complete this Hall of Fame nomination form and is encouraged to submit an ample amount of supporting data, such as statistics, bios, clippings, articles or other informative materials regarding the candidate.
3. If you would like to nominate an athlete for the Hall of Fame, Class of 2015, complete the following information and return this form and any attachments.
4. Criteria:
 - a. Nominee must be a minimum of 5 years removed from their last eligible season of NCAA competition.
 - b. He or she must have demonstrated good citizenship character in his or her life.
 - c. He or she should have demonstrated superior contributions to the sport of cross country and/or track & field while attending a NCAA Division II institution.

PLEASE NOTE: the USTFCCCA will provide one night of lodging and four (4) banquet tickets for the inductee and guests. The inductee (or his or her former institution) will be responsible for their own transportation to the championship/Hall of Fame banquet site. They will need to attend the banquet if elected.

NOMINATION DEADLINE: December 5, 2016

NOMINEE:

Name while competing: _____

Married last name (If applicable): _____

Institution attended: _____ Years competed: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____ Alternate Phone: _____

Email Address: _____

Employer: _____



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P.O. Box 55969 • Metairie, LA 70055-5969 • www.ustfccca.org

ATHLETIC ACHIEVEMENTS:

Please list accomplishments/milestones/awards of the nominee: (use additional paper, attach clippings or other information as needed)

ADDITIONAL COMMENTS MAY BE POSTED ON THE BACK OF THIS FORM

NOMINATOR

Name: _____

Institution: _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____

Alternate Phone: _____

Email: _____

Relationship to Nominee (if any): _____

Signature of Nominator: _____

RETURN THIS FORM TO:

By Mail: Kevin LaSure
Academy of Art University
79 New Montgomery Street
San Francisco, CA 94105

By Email: KLaSure@academyart.edu

Due Date: December 5, 2016