

**Apex High School/Apex Consolidated**

**SPORTS HALL of FAME**

**NOMINATION FORM**

Year of Nomination

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **NOMINEE INFORMATION**

|  |  |
| --- | --- |
| NAME: |  |
| LAST | FIRST | MIDDLE | NICKNAME |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ADDRESS: |  |  |  |  |
|  | STREET | CITY | STATE | ZIP CODE |
| EMAIL ADDRESS: |  |
| DATE of BIRTH: |  | PHONE: | ( ) |  | ( ) |  |
|  |  | HOME |  | WORK / CELL |

|  |  |  |  |
| --- | --- | --- | --- |
| Is nominee an AHS graduate? |  | If **YES,** years in attendance: |  |
| Is nominee an Apex Consolidated graduate? |  | Year of Graduation: |  |
| *(Must have graduated at least 5 years prior to nomination)* |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Name(s) of College(s) /University attended. |  | Degree (Masters, Doctorate, etc.) |  | Years Attended / Graduated |
| 1) |  |  |  |  |  |
| 2) |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| Nominated for contributions to AHS/Apex Consolidated  |  | ATHLETE |
| sports program as a(n) |  | COACH |
| (Please check all that apply) |  | ADMINISTRATOR |
|  |  | VOLUNTEER |

**NOMINEE’S ATHLETIC/COACHING/SUPPORTING ACHIEVEMENTS AT AHS/Apex Consolidated**

|  |  |
| --- | --- |
| *Please feel free to attach up to* ***five (5)*** *additional support pages about the nominee.*  | DATE(S) |
| SPORT | ACHIEVEMENT | Participated |
|  |  |  |
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**NOMINEE’S OTHER ATHLETIC / COACHING ACHIEVEMENTS**

|  |  |  |
| --- | --- | --- |
| College/University and/or Professional Athletics | ACHIEVEMENT | DATE(S) Participated |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**NOMINEE’S CIVIC / CHARITABLE ACTIVITIES**

Please list church, civic, or charitable activities indicative of exemplary citizenship.

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. **STATEMENT**

*Please type and attach a brief statement on why this person would be an excellent nominee for the Apex High School/Apex Consolidated Sports Hall of Fame.*

1. **SPONSOR INFORMATION (Person Making Nomination)**

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LAST FIRST MIDDLE

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STREET CITY STATE ZIP CODE

EMAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE: (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOME WORK / CELL

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return this nomination form no later than June 1st if wish your candidate to be considered for induction to:

**APEX HIGH SCHOOL**

**ATTN: ATHLETIC DIRECTOR / HALL OF FAME
1501 LAURA DUNCAN ROAD**

**APEX, NC 27502**

**FAX # (919) 387-3023**

**jferguson@wcpss.net**