

**NORTH CANTON HOOVER HIGH SCHOOL
ATHLETIC HALL OF FAME
NOMINATION INFORMATION**

Name (First, Last & Maiden) _____
Address _____
City _____ State _____ Zip Code _____
Primary Phone _____ Secondary _____
Email _____
Years Attended NC Hoover High School _____

Sports Played	# Varsity Letters Earned

High School Academics & Athletic Honors

High School Records

College(s) Attended: _____
Years Attended: From _____ to _____

College Academic & Athletic Honors & Records _____

Current Profession/Occupation

Post-Secondary Contributions, Accomplishments or Community Involvement _____

Name of Person Nominating _____
Email _____ Phone Number _____
Date Completed _____ Year of Consideration _____

**SEND TO: Mr. Tim Walker, Athletic Director
North Canton Hoover High School
525 Seventh Street NE
North Canton, OH 44720
330-497-5660**