

St. Francis High School



Hall of Fame

St. Francis High School Hall of Fame Nomination Form

Instructions

All information on this form must be completed and received no later than July 1. Include with this nomination, if possible:

- ▶ Photocopies of newspaper clippings, articles, event programs, or other such material that detail information of the nominee's accomplishments. Please do not send originals as we are unable to return these items.
- ▶ A photograph of the nominee.
- ▶ All information submitted shall be retained by the Hall of Fame Committee, and all action necessary to the selection process shall remain confidential.
- ▶ Return the completed nomination form and support material to:
Ron Larson, HOF Chairman
St. Francis High School
3325 Bridge Street NW
St. Francis, MN 55070
- ▶ Please check the appropriate nomination category:
 - Athlete – SFHS graduate and out of school for at least 10 years
 - Coach – must have coached for Independent School District 15
 - Advisor – must have been an advisor for a SFHS activity
 - Special Division (volunteer, community contributor, distinguished alumni)
must have made significant contributions to SFHS and/or community or society

Nominee Information

Hall of Fame nominee name _____

Current address _____

City _____ State _____ Zip _____

Phone (include area code) _____

Place/date of birth _____ If deceased, date _____

Name of spouse or closest living relative _____

Current address _____

City _____ State _____ Zip _____

Phone (include area code) _____

Education

Year graduated from St. Francis High School (*if applicable*) _____

Name of college/university _____

Year graduated _____ Degree _____

Name of post graduate school _____

Year graduated _____ Degree _____

Recognition

Honors and achievements (give complete details of special honors, awards and recognition, outstanding performances, records, etc. ...)

Post-high school achievements

Other information (not previously listed) that substantiates the nominee's accomplishments

Individual Submitting Nomination

Name _____

Address _____

City _____ State _____ Zip _____

Phone (include area code) _____

Signature _____ Date _____

OFFICE USE ONLY

Date received _____ Date inducted _____