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**OHIO HIGH SCHOOL WRESTING COACHES ASSOCIATION**

**HALL OF FAME NOMINEE**

 ***THE FOLLOWING ITEMS MUST BE SUBMITTED TO THE DISTRICT REPRESENTATIVE PRIOR TO SEPTEMBER 15 OF EACH YEAR IN ORDER FOR THE NOMINEE TO BE CONSIDERED.***

1.) **Completed nomination form** with typed narrative stating information about the nominee

 that may be helpful to the selection committee.

 2.) **Three letters of recommendation**

 3.) **An image of the nominee**

**Nominee’s Information:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Primary phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Nominator’s Information:**

Name of the nominator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary phone number of nominator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email of nominator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Category in which nominee is being submitted. (Wrestler, Coach, Official, Contributor). Period of Service in Ohio Wrestling:

**I. Category One: Wrestler**

Number of State Championships

Number of District Championships

Number of Sectional Championships

Number of Conference Championships

Collegiate Awards or Achievements:

Please attach a paragraph briefly stating additional information about nominee

that may be helpful to the selection committee.

**II. Category Two: Coach**

Number of State Championship Teams:

Number of District Championship Teams:

Number of Sectional Championship Teams:

Number of Conference Championship Teams:

Number of State Champions:

Number of State Placewinners:

Number of State Qualifiers:

Coaching Honors:

Other Credentials:

Please attach a paragraph briefly stating additional information about the

Nominee that may be helpful to the selection committee.

**III. Category Three: Official**

Number of State Tournaments Officiated:

Number of District Tournaments Officiated:

Number of Sectional Tournaments Officiated:

Officiating Honors:

In what other categories were you involved in wrestling:

Please list accomplishments, credentials, etc, in the above categories:

**IV. Category Four: Contributor**

Please attach your contributions, years of involvement, and other information

that may permit us to make sound decision regarding your candidacy.