Western Kentucky University W-Club ATHLETIC HALL OF FAME Nomination Form

Name and Address of Nominee:	
Telephone(s): ()	
Nominated as Athlete	
Telephone(s): ()	Date Nomination Submitted:
Please provide supporting comments and rationale. Use additional sh	neet(s) as necessary.
1. Total number of athletic letters earned: Sport: Sport:	Year(s): Year(s):
2. Team captain:YesNo Year(s):	
3. All-Conference:YesNo Year(s):	
4. All-American:YesNo Year(s):	
 5. Participated in NCAA championshiplayoffs, tournaments, meets: 6. NCAA Champion:Yes No 7. Additional Athletics Recognitions (Conference Player-of-the-Year; Recognition:Recognition: 	; Conference, State, Regional Player-of -the-Decade, etc.): Year(s):
8. Special Team Recognition (Offensive, Defensive, Rebounder, MVF Recognition: Recognition:	Year(s):
9. Non-athletics student recognitions (student body president, Who's Recognition: Recognition:	Year(s):
10. Professional athletics participation:YesNo Organization/Team (Years):	
11. Additional pertinent information (remember, you may submit ac	dditional sheet(s), if necessary):

- Questions?: contact W-Club Secretary Paul Just (paul.just@wku.edu; 270-792-4247)