ST. CROIX VALLEY ATHLETIC HALL OF FAME SPORTS ACTIVIST NOMINATION FORM

Name of person being nomina					
Current Address:		e	First Name	Middle	
Current Address	Street	City	State	Zip Code	
Email Address:		Phone:		•	
Years Candidate Has Lived in So	chool District #834:	Total Years of	Service to District At	hletics:	
Name of Person Nominating th					
Email:Phone:					
Person nominating this cand acquiring a minimum of on LIST ATH (Consider: Coaching: VAA, H	e and not more than two t	yped letters of i	recommendation regarders	arding this candidate. /ED	
ACTIVITY/SPORT	•	POSITION HELD		YEARS SERVED	
ORGANIZATION	MEMBERSHIP IN A		ATIONS HONORS	<u>YEARS</u>	
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