

# Hall of Fame Nomination

**Complete and return to Activities Director, Central City High School,  
1510 28th St., Central City NE 68826**

\*\*\*Candidate must have graduated at least five years prior to the voting\*\*\*

Nominee

Date Submitted

Check Appropriate Category

Athlete

Coach

Booster

Nominee Information (If Known)

Date of Birth

Graduation Year

Present Address

Street

City

State/Zip

Check sports the nominee was involved in:

Football

Basketball

Track

Cross Country

Wrestling

Baseball

Volleyball

Golf

Tennis

## Achievements and Contributions

List your reasons for nominating this individual. If possible please include career facts, highlights, awards, etc. to aid the committee in the selection process.

(Attach additional pages if needed)

Person submitting this nomination \_\_\_\_\_

**Must be returned to Mr. Anderson at the high school office by May 1.**

**[janderson@centralcityps.org](mailto:janderson@centralcityps.org)**