Jim Thorpe Area Sports Hall of Fame Nominee Resume

Date:	
Name of Nominee:	Submitted by:
Address:	Address:
City/State/Zip:	City/State/Zip:
Telephone #	Telephone#
Complete the following sections that apply	to the nominee. Please provide as much information as possible
2. Schools Attended & Dates:	Circle Appropriate Start
Grade School	19/20 - 19/20
High School	19/20 - 19/20
Other	19/20 - 19/20
Other	19/20 19/20

3. Athletic Achievements / Contributions

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2. Athletic Achievements / Contributions (continued):

3. Current Information: Family /Employer / Career (Previous if retired)

4. Pictures : If possible , please enclose an original photograph of the nominee at the time of their accomplishments, as well as a current photo. All photos will be returned as soon as possible.

Complete and mail to: Jim Thorpe Area Sports Hall of Fame PO Box 4004 Jim Thorpe, PA 18229-4004