

**DONEGAL
ATHLETIC HALL OF FAME
NOMINATION FORM**

Name of Nominee / Team: _____

Address: _____

Phone: _____ Email: _____

Classification of Nominee: Individual Athlete Athletic Team
 Coach

Graduation Year or Years Associated with Donegal: _____

In the space provided below, provide information supporting candidate for induction to the Hall of Fame. This should include, but is not limited to: athletic awards, honors, accomplishments and supporting statistical information at the high school, personal characteristics and other pertinent data.

Name of Nominator: _____

Address: _____

Phone: _____ Cell: _____

Email: _____

Return this form to: Frank Hawkins, Athletic Director
Hall of Fame
Donegal High School
1025 Koser Road
Mount Joy, PA 17552
Email: frank.hawkins@donegalsd.org