



ATHLETIC HALL OF FAME INDIVIDUAL NOMINATION FORM

Individual Nominee

(Supply as much information as possible)

Name _____ Year of Graduation _____

Address _____

City/State/Zip _____

E-Mail _____ Day Phone _____

Please summarize the accomplishments of your candidate. You may also provide information on a separate sheet.

Nominator

Name _____ Year of Graduation (if applicable) _____

Address _____

City/State/Zip _____

E-mail _____ Day Phone _____

Check here if you do NOT wish to be publicly recognized as the Nominator

By **August 31st**, scan and email or mail the completed form to:

Jenna Goworowski
ICCP Director of Alumni & Special Events
217 Cottage Hill Ave
Elmhurst, IL 60126
jgoworowski@iccatholicprep.org

Questions? Call (630) 530-3491