



# Scott County Sports Hall of Fame, Inc.

P.O. Box 402, Lake, MS 39092-0402 601-507-1526 / 601-507-2772  
Form revised 4/21/2026 scottcountymys.sports.halloffame@gmail.com

## Official Nomination Application

**DIRECTIONS:** Please follow instructions closely. *Failure to complete form will result in nomination being null and void.* All information should be provided in neat and legible condition. Unreadable nominations will not be considered. Please attach a photo of the nominee to form. Photo must be 3 inches by 5 inches in size and WILL NOT be returned. **The deadline for the Hall of Fame to receive nominations** for the next immediate class annually is **SEPTEMBER 30**. Nominations received after that date will be held for consideration for following classes. **Eligibility rules and all other information can be found online at [scottcountysportshalloffame.org](http://scottcountysportshalloffame.org)**

### Nominee Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Current Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Birthplace: \_\_\_\_\_ Hometown: \_\_\_\_\_

Connection to Scott County: \_\_\_\_\_  
*(Must have been active on high school level and above; a minimum of 1 season as player or 5 seasons as coach)*

Is the nominee deceased? YES  NO  If yes, give dates of birth and death? \_\_\_\_\_

Is the nominee over the age of 50? YES  NO  If yes, give birthdate: \_\_\_\_\_

*Nominees: former player, coach, or a non-athlete contributing to sports program(s).* (circle ONE only) **PLAYER COACH CONTRIBUTOR**

### Nominee's Education

High School: \_\_\_\_\_ Town: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did nominee graduate? YES  NO  \_\_\_\_\_

College: \_\_\_\_\_ Location: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did nominee graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did nominee graduate? YES  NO  Degree: \_\_\_\_\_

**Person submitting nomination**

Your Name: \_\_\_\_\_ Relationship to nominee: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Disclaimer and Signature**

*I declare that my answers are true and complete to the best of my knowledge.  
If this nomination application is approved, I understand that should any information contained herein be discovered as false or misleading, such revelation may result in the disqualification of the nominee.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Athletic Accomplishments and Honors**

School(s)	Sport(s)	Years
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Professional team(s)		
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Civic / Career Accomplishments, Other Honors and Activities**

Organizations/Activities	Career	Other Honors
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Additional information**

Attach pages as needed for athletics, civic, career, and other honors. Please provide the most information possible.