

# Hall of Fame Nomination form

## Nomination details

I, hereby,  
nominate:

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Address:

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State/Zip

City:

Code:

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Videophone #:

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Email address:

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## Categories

Please check the box of the \* category for this nomination

Check all that apply

Arts (Drama, painting, photography, or etc.)

Community Service (Organization, clubs, schools, or etc.)

Education (Teacher, student, administrator, staff, or etc.)

Sports (Actively participated in any sports; player or couch)

## Questions

Is this nominee a former TSD student?

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If yes, what year did this nominee enroll or what year did this nominee graduate?

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Was this nominee a TSD employee?

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If yes, what year did this nominee work?

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**Mailing**

Please send all supporting materials (newspaper clippings, pictures, awards, etc.) to:

**TSDAA**  
**Heritage Center**  
**1102 S Congress Ave**  
**Austin, TX 78704**

Or e-mail:

[TSDAAwebsite@gmail.com](mailto:TSDAAwebsite@gmail.com)

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Please check either line that we will look for them?

Will send to mailing address

Will send to email address

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**Agreement**

I certify that the information contained herein is true and correct to the best of my knowledge. I agree to allow the TSDAA Hall of Fame committee to contact appropriate agencies or individuals' only to verify any statements made on my nomination form. I agree to provide additional information and/or documentation as required, plus an on-site review by the selection committee if requested. By checking the box of the agreement below, I allow the TSDAA recognition committee to use my name and/or my business' name in promoting this program. In consideration for my nomination and possible induction into the TDAA Hall of Fame. I agree to hold harmless TSD administrators, TSDAA officers, TSDAA board members, and Hall of Fame committee.

I agree.

Your name: \_\_\_\_\_

Address: \_\_\_\_\_  
State/Zip

City: \_\_\_\_\_ Code: \_\_\_\_\_

Videophone #: \_\_\_\_\_

Email address: \_\_\_\_\_

Cutoff date: September 1<sup>st</sup>.