

**Oswego Music Hall of Fame, Inc.
Nomination Form**

Mail Form and supporting documents to: 94 Mariposa Drive, Oswego, NY 13126

To be considered for this year's induction ceremony for the, Oswego Music Hall of Fame, complete this form in its entirety and return it along with supporting materials to the address above **NO LATER THAN APRIL 30, 2019**.

If the applicant is not chosen for induction this year, the application will remain in an active file for consideration for future years. Please consider updating your information on a yearly basis. Supporting materials (i.e., pictures, press releases, interviews, newspaper/magazine articles, album/CD's, liner notes, recording credits, etc.) are required to be included with the nomination form.

All materials submitted become the permanent property of the OMHOF and will not be returned. If the nominee is selected, the materials provided may be used on our website and/or in publications .

The Oswego Music Hall of Fame, Inc. prides itself on honoring the most deserving musicians in Oswego County. Public input is needed to ensure the most deserving candidates are recognized each year for the induction ceremony. In order to preserve music cultural diversity, all genres are considered for awards.

A committee selected by our board carefully reviews all nominees before presentation to our Board Of Directors. The Board's decision is final.

Only files completed with all the necessary documented information outlined in the nomination form are considered for review.

CONTACT INFORMATION FOR PERSON SUBMITTING NOMINATION

We will contact you if more information is needed:

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____
ZIP: _____ E-MAIL: _____ PHONE: (_____) _____

TYPE OF NOMINATION

Check All That Apply

Music Ensemble/ Band **Solo Artist** **Educator** **Enrichment Nominee**

Attach a separate piece of paper if necessary.

NAME: _____ CHECK IF DECEASED
ADDRESS: _____
CITY: _____ STATE: _____
ZIP: _____ E-MAIL: _____ PHONE: (_____) _____

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ADDRESS: _____
CITY: _____ STATE: _____
ZIP: _____ E-MAIL: _____ PHONE: (_____) _____

NAME: _____ CHECK IF DECEASED
ADDRESS: _____
CITY: _____ STATE: _____
ZIP: _____ E-MAIL: _____ PHONE: (_____) _____

MUSIC CONNECTION

Does/did the nominee reside in Oswego County, NY? YES NO

If yes, how long? _____

If no, do/did they impact the music community of Oswego County? How?

Does/did the nominee perform in Oswego County, NY? YES NO

If yes, how long? _____

RECORDING STATUS

Does/did the nominee have recordings? YES NO

On what level? **Check All That Apply**

INTERNATIONAL NATIONAL REGIONAL LOCAL

***Required: supporting documents, and recordings.**

Attach a separate piece of paper if necessary.

List recordings below:

1. ALBUM TITLE: _____
ARTIST: _____ RELEASE DATE: _____
2. ALBUM TITLE: _____
ARTIST: _____ RELEASE DATE: _____

CAREER ACCOMPLISHMENTS

Required:

- Photograph (if selected this will be used for the website and publications).**
- Biography (A personalized composition of the life of nominee).**
- If available include: supporting documents, news clippings, articles, reviews, and any other items of interest that support the nominee.**

1. Nominee is best known for/career highlights? (provide supporting documents):

2. Main instrument: _____
3. Genre of Music: _____
4. Community service in music that benefited Oswego County:

