

**THE CITY COLLEGE OF THE CITY UNIVERSITY OF NEW YORK
ALUMNI VARSITY ASSOCIATION**

P.O. Box 177
New York, NY 10027

ATHLETIC HALL OF FAME NOMINATION FORM

Biographical Data for Nominee

Name (please print) _____

Address _____

Schools and Colleges attended and degrees earned (list dates)

Supporting data for the following categories must be typewritten on separate sheets and appended to this form. Please list dates.

1. Record as an Undergraduate

- a) Athletic
- b) Other

2. Post-CCNY Achievements

- a) Athletic
- b) Other

3. Additional personal qualifications of nominee

Biographical sketch submitted by: _____

Name

Address

Email

Phone

Date

NOTE:

All nominees' qualifications will be researched by the Board of Directors and acted upon only after the research has been concluded.