

St. Bernard Sports Hall of Fame

Induction and Award Application

Application Type: (please check all that apply)

Hall of Fame Induction ____ Humanitarian of the Year ___ Elphage Calliouette ___ Male Amateur ___ Female Amateur ___

Name:		
Place of Birt	h:	Date of Birth:
Duration of	Residence i	n St. Bernard:
Sport(s):		
Activity: (ple	ease check a	ll that apply)
Athlete	Coach	Booster/Philanthropist Personality
Other (plea	ise describe)):
Schools/Insti	tutions/Tea	ms/Events: (please start with most recent)
1	 	Position/Title:
Vears.	Accolad	les:

2		Position/Title:
Years:	Accolades:	
3		Position/Title:
Years:	Accolades:	
		Position/Title:
Years:	Accolades:	
		Position/Title:
Years:	Accolades:	

(If more space is needed, please provide an attachment using the same format as above)

Brief Athletic Career Narrative:			
Brief Academic and Professional Career Narrat	ive:		
	-		
Brief Personal Narrative:			
(Please attach any supporting documents, include articles, letters of recommendation			
I hereby attest that the information provided in th	is application is accurate		
Name: (if different than nominee)			
Signature:	_ Date:		