



**COACH NOMINATION FORM**

Name of Nominee: \_\_\_\_\_  
Address of Nominee: \_\_\_\_\_  
Telephone Number/ Email of Nominee: \_\_\_\_\_  
Sport (s): \_\_\_\_\_  
Years Coached: \_\_\_\_\_  
Championships/ Honors: \_\_\_\_\_

*Describe in detail why this Coach should be inducted into the Union High School Athletic Hall of Fame:*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Submitted by: \_\_\_\_\_ Contact Information: \_\_\_\_\_

\*\*\*Must be retired from coaching\*\*\*

Please return to the Union High School Athletic Office, 2350 North Third Street, Union, NJ 07083 or by email to: lionta@twpunionschools.org