

Ultimate Hall of Fame: 2008 Contributor Candidate Questionnaire

This questionnaire must be completed by, or on behalf of, a candidate. Also, please include one or two completed Nomination Reference Forms. Feel free to attach additional information if appropriate.

I. PERSONAL DATA

Full Name: _____ Nickname: _____

Home Address: _____

City/State/Zip: _____ Birth Date: _____

Home Phone: (____) _____ Work Phone: (____) _____

Cell Phone: (____) _____ E-Mail: _____

For biographical purposes only, tell us a little bit about your life outside disc:

II. SERVICE

Has the candidate served in an official capacity as an officer, committee member, coordinator, or volunteer for the UPA or other disc organization? Describe positions and dates served:

Last Name: _____

Has the candidate organized Ultimate tournaments, leagues, teams, etc. Describe role and dates served:

Has the candidate made other contributions to the development of Ultimate?

Last Name: _____

IV. PLAYING CAREER

Describe school and club team involvement and dates:

Describe significant playing accomplishments, if any:

V. MISCELLANEOUS

Please list any non-Ultimate related honors or achievements that may be relevant:

Please send completed questionnaires, together with a digital photograph of the candidate, to Suzanne Fields, UPA Alumni Director by e-mail at upa_alumni@upa.org. Questions please call (808) 927-4095. Preferred format is a scanned pdf file if possible. Package should also include one or two letters of reference from third parties providing support for the candidacy. **Submissions must be received no later than June 30, 2008.**

Ultimate Hall of Fame: 2008 Nomination Reference Form
CONTRIBUTOR LETTER OF RECOMMENDATION

Name of Nominee: _____

Describe, in brief, why you are recommending this player for the Hall of Fame. What is it that makes the candidate stand out among his peers?

What are the candidate's top three accomplishments that you feel justify this nomination:

How do you know the candidate?

Reference submitted by:

Name: _____

Address: _____

City/State/Zip: _____

Home Phone: (____) _____ Work Phone: (____) _____

Cell Phone: (____) _____ E-Mail: _____

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