

SAN MATEO HIGH SCHOOL
ATHLETIC HALL OF FAME
APPLICATION

APPLICANTS NAME: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Telephone: Day: _____ **Email Address:** _____

Evening: _____

Category: (1) Athlete: (2) Coach: (3) Community Service: (4) Team: _____

1. **Athlete:** Years attended: _____ Year Graduated: _____

Sports Played: _____ Awards: _____

Reason for Nomination: _____

College Attended: _____ Sports Played: _____

Pro Played: Team: _____ Years: _____ Awards: _____

Other Post High School Teams/Performances: _____

2. **Coach:** Teams and Years Coached: _____

Reason for Nomination: _____

3. **Team:** Year and Sport: _____ Record: _____ Championships: _____

Reason for Nomination: _____

4. **Community Service:** Name: _____ Position: _____ Years: _____

Reason for Nomination: _____

Name of Person Making Nomination: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Telephone: Day: _____ **Evening:** _____ **Date:** _____

Mail to: San Mateo High School – 506 N. Delaware St. – San Mateo – CA – 94401

Att: Athletic Hall of Fame