



Wall of Fame Nomination Form

The Wall of Fame Committee recognizes superior ability, effort and achievement that have brought special distinction to citizens of Espanola on the provincial, national and international stages.

Date of Nomination: _____

Name of Nominee: _____

Nominee's Current Address: _____

Nominee's Phone: Home: _____ Cell: _____
Work: _____

Category: Sport Recreation Culture

Level of Achievement: Provincial National International

Name of person making nomination: _____
Address: _____

Phone: _____

As nominator of a Wall of Fame candidate would you be willing to volunteer your time to assist with organizing a recognition event or ceremony should your nominee be selected by the committee? Yes No

Why do you feel the person you are nominating for the Espanola Wall of Fame should be selected? Please include any facts, accomplishments, special honors or other material that would be of assistance to the Wall of Fame Committee. (Use reverse side of form, or attach additional pages if required.)
