



# **SOUTH CAROLINA SENIOR SPORTS CLASSIC HALL OF FAME**



## **APPLICATION FOR CONSIDERATION FOR INDUCTION**

**Date:** \_\_\_\_\_

**Nominee’s Personal Information:**

Name in Full \_\_\_\_\_

Circle one:      Male                      Female                      Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_                      Age \_\_\_\_\_

Address:      City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone      (\_\_\_\_)\_\_\_\_-\_\_\_\_ H      (\_\_\_\_)\_\_\_\_-\_\_\_\_ C

**Athlete Nominee’s Sport Information:**

- 1) Sport Category(s) \_\_\_\_\_
- 2) List of accomplishments (list on a separate document and attach to this application)
- 3) Reason for nomination (list on a separate document and attach to this application)

**Non-Athlete Nominee’s Information:**

- 1) Reasons for recognition (list on a separate document and attach to this application)

**Nomination:**

Nominated by \_\_\_\_\_

Title/Affiliation of Nominator \_\_\_\_\_

Address:      City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone:      (\_\_\_\_)\_\_\_\_-\_\_\_\_ H                      (\_\_\_\_)\_\_\_\_-\_\_\_\_ C

**Supporting Letter(s):**

All nominations will be supported by two endorsements.

Supporting letter(s) should explain why the nominee qualifies for induction in to the “Senior Sports Classic Hall of Fame” in the opinion of the nominator/expert, etc. (100 words or less).

Return this application with the required supporting letter(s) , copies of the most impressive media attention received by the nominee about their athletic achievements after the age of 50 (newspaper and/or magazine articles, with names and dates of the publication, clearly readable). Copies of other documentation may be submitted.

**Submit to:**                      SC Senior Sports Classic  
   PO Box 3401  
   Florence, SC 29502

**DEADLINE FOR NOMINATION IS JANUARY 15**

# ***Selection Process Rules and Criteria***

- A) The SCSSC will establish a “Hall of Fame” to recognize those outstanding teams, athletes, and supporters that have made the organization great.
- B) The SCSSC will petition the “SCSSC Foundation” for a grant to fund this program.
- C) Forms for the “SCSSC Hall of Fame” nominations will be available by November 15<sup>th</sup>.
- D) Nominees shall be submitted to the “SCSSC Hall of Fame” Committee before January 15<sup>th</sup>.
- E) The selection committee shall consist of a Chairperson to serve a four (4) year term. Board members, sponsors, etc. to be determined by the chairperson.
- F) Inductions will be awarded at the “Celebrations of Athletes” during the SCSSC State Games. A reception will follow the ceremony.
- G) Nominations will be held active for two (2) induction periods.
- H) Selectees will be inducted every two (2) years as determined by the Board.
- I) The candidates shall have participated in the SCSSC State games for a minimum of 10 years.
- J) Recipients will be given a choice of the following awards: Ring, Broach, Plaque  
Special category recipients and those accepting for posthumous recipients will receive a plaque.
- K) Criteria for selection shall include:
  - a. Multiple medal winners on the state and/or national level.
  - b. State record holders.
  - c. Year around performance achievers.
  - d. Outstanding contributors on the local, state, or nation level toward the cause of senior health.
  - e. Continuous supporter of the SCSSC and its goals.
  - f. A special category for coaches, sponsors, leaders, organizations, etc. who have contributed to the advancement of the SCSSC and its mission.