## LICKING COUNTY AGRICULTURAL HALL OF FAME

The **LICKING COUNTY AGRICULTURAL HALL OF FAME** was established to recognize those individuals who have demonstrated a life-long exemplary service to their community and the industry of agriculture.

**NOMINATIONS** may be made by any individual or organization by completing a nomination form and returning it to The Ohio State University Extension, Attn: Licking County Hall of Fame Committee, 771 E. Main St., Suite 103, Newark, OH 43055. Nominations forms can also be emailed to the OSU Licking County Extension Office at kreager.5@osu.edu.

The deadline for nominations is December 31st.

**RECIPIENTS OF THE AWARD** must be a resident of Licking County. Nominations are open to men, women or family couples. Additionally, the recipients may be living or deceased. A husband and wife may be nominated as one nominee.

## **NOMINEE QUALIFICATIONS INCLUDE:**

- Contributions in education of others
- Leadership
- Conservation
- Cooperation with established groups and individuals
- Interest and help in youth activities
- Mentorship
- Dedication
- Volunteer work done outside realm of employment
- An innovator, motivator and progressive

## **GUIDELINES FOR HALL OF FAME NOMINATIONS**

- List the areas for which the nominee should be recognized. They may include but are not limited to those listed above. Specific details relating to the nominee will be listed in Sections 2 through 7 of the application. Point values are listed with each section based on the importance of each toward receiving this award.
- Section 2 and 3: Emphasis should be on areas in which the nominee has excelled.
- Section 4: Organizations, boards and committees that the nominee served on and office held. These
  may include, but are not limited to local government, church, school and community service
  organizations.
- Section 5: Awards, citations and recognitions. They should support the activities listed in Sections 1, 2 and 3 but should also include other awards the nominee has received that bring credit to the nominee, but not necessarily in the areas they are nominated for. An example would be military and awards.
- Section 7: Outstanding personal traits. Write in narrative form why your nominee should become a member of the Licking County Agriculture Hall of Fame.

THE **NOMINATION FORM** is in a fillable PDF format. It can be completed and signed electronically and/or printed as needed. Please answer as many questions as possible. Be sure to sign the form when complete.

## LICKING COUNTY AGRICULTURAL HALL OF FAME NOMINATION FORM

Name of Nominee:				
Date of Birth:		Deceased Date (if applicable):		
Address:				
City:		State:	Zip:	
Phone Number:		Work Phone Number:		
Years as a Resident of Licking County:				
Number of years nominee has served in the agricultural industry in Licking County:				
<b>Education:</b>	High School Attend		Years	
	College Attended		Years	
	Degrees Granted			
Person or Organization Completing this Form:				
Contact Name:				
Address:				
Phone Number:		Work Phone Number:		
E-mail Address:				
Family Contact Name:		Relationship:		
Address:				
Phone Number:		Work Phone Number:		
E-mail Addres	ss:			



**Return nomination form to:** 

The Ohio State University Extension Attn: Licking County Hall of Fame Committee 771 E. Main St., Suite 103 Newark, OH 43055 -or- send via email to kreager.5@osu.edu

1.	Briefly describe the operation and/or occupation of the nominee.
2.	Explain contributions nominee has made in service to Licking County agriculture. (20 points)
3.	Explain contributions nominee has made in service to agriculture beyond Licking County. (20 points)
4.	List Organizations or Associations of which the nominee was a member; list offices held and awards received. (30 points)  a. Local (15 points)

Please complete the following sections. Additional pages can be added if necessary.

<b>b. State</b> (10 points)
c. National (5 points)
5. List awards, citations and recognitions of individual. (10 points)
6. Other activities of nominee such as community, military, church, youth or government. (10 points)
7. List this individual's outstanding personal traits. (10 point)
7. List this marvidual's outstanding personal truits. (10 point)
I certify that the above statements are true and accurate.

Signature Date Signed