

Minnesota Recreation and Park Association United States Specialty Sports Association Minnesota USSSA Hall of Fame Manager/Coach Application



Election to the Minnesota USSSA Hall of Fame is the highest honor that can be bestowed upon a member. The candidate does not have to be a retiree to be nominated or elected; however, all candidates must have been a member or associated with Minnesota USSSA for at least ten (10) years and must be at least forty (40) years of age or more. The years of service and age requirement will not apply to any candidate who is deceased. The candidate will have demonstrated extraordinary service, devotion, ideas and ideals above and beyond the ordinary over the years. Therefore, very careful consideration should be given before submitting a candidate's name. Please complete all parts of this application to the best of your knowledge.

A candidate for the Hall of Fame must be recommended to the Minnesota USSSA State Director. Such recommendations must be submitted in writing no later than October 1 of each year, using the Official "Minnesota USSSA Hall of Fame Nomination". All candidates nominated will be sent an application to submit by November 1 and shall include detailed background information, statistics and a recent photograph of the candidate in order for proper consideration to be given if the information wasn't already provided on the application form received. All recommendations are only good for one (1) year. Unsuccessful candidates must be resubmitted each year. A person can only be elected to the Minnesota USSSA Hall of Fame once.

On November 15 of each year, that year's Minnesota USSSA Hall of Fame inductees will be announced. They will be honored at a banquet in January of the next year and will receive their Minnesota USSSA Hall of Fame Awards.

		Candidate's Information	
Condidate/s Full Name.			
Candidate's Full Name:	First Name	Middle Name	Last Name
Candidate's Address:	Mailing/Street Address		
	Walling/Street Address		
	City	State	Zip Code
Candidate's Phone #:			
	Home #	Work #	Cell #
Candidate's Email Address:			
Canada Co S Eman / (acress)	Email Address (required)		
Conditional Data of Bloth			
Candidate's Date of Birth:	Month	Date	Year
		Nominator's Information	
Nominated By:	First Name	Last Name	
	That Name	Last Name	
Nominee's Address:			
	Mailing/Street Address		
	City	State	Zip Code
Nominee's Phone #:			
	Home #	Work #	Cell #
Nominee's Email Address:			
Nominee's Email Address:	Email Address (required)		
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	MANAGER/COACH INFORMATION
1.	Are you a manager or coach? Manager Coach Are you active or retired? Active Retired If retired, what year?
2.	How many years have you managed or coached softball?
3.	How many years have you managed or coached USSSA softball?
4.	List names of USSSA teams managed or coached in USSSA:
5.	Give in detail your participation in USSSA State, National and World Tournaments. Include tournament classification, championship titles won and the years. Also list any special awards received, etc.:
6.	Give your overall USSSA won and loss record as a manager or coach: Wins: Losses: Ties:
7.	Give in detail your greatest thrill managing or coaching in the Minnesota USSSA program:
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8.	Give the most exciting event in your career while participating in the Minnesota USSSA program:
9.	In a brief statement give your opinion of the game of softball, the USSSA organization and any suggestions for its betterment:
10.	Additional remarks – use extra blank sheets if needed:
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Candidate Name (print)		Candidate Name (sign)	
Nominator Name (print)		Candidate Name (sign)	
/ / Month Date Year			
The MN-USSSA Hall of Fame inductees clothing choices consist of conservative			
This application must be mailed to:	Minnesota USSSA Hall of Fame Committee 200 Charles Street Northe Fridley, MN 55432	Emailed to: Faxed to: ast	softball@mnrpa.org 763-571-5204 (need original copy)
	Minnesota Hall of Fa	ame Committee	
Application received by Minnesota USS	SA State Director on:		
Month	Date	Ye	ar
Remarks by the Hall of Fame Committe	e:		
Final Action by Hall of Fame Committee	n:		
Final Action by Hall of Fame Committee Color Photo attached (8 x 10) – Headsh Chair, Hall of Fame Committee Name (p	ot Yes No		