

AWOSIKA MUSEUM AND HALL OF FAME
HALL OF FAME INDUCTEE NOMINATION FORM

2022

Please complete and sign THE NOMINATION FORM below. You can also submit additional SUPPORTING DOCUMENT (including the nominee's resume or biographical data) to justify your nomination.

- I. NOMINEE'S FULL NAME:
- II. INDICATE DATE OF BIRTH AND DATE OF DEATH IF DECEASED:
- III. PLEASE INDICATE THE FAMILY LINEAGE OF THE NOMINEE:
- IV. NOMINEE'S ADDRESS OR FAMILY ADDRESS:
- V. NOMINEE'S TELEPHONE NUMBER AND EMAIL IF APPLICABLE:
- VI. PLEASE DESCRIBE THE NOMINEE'S NOTEWORTHY PERSONAL AND/OR PROFESSIONAL ACHIEVEMENTS (SHORT BIO):
- VII. PLEASE DESCRIBE ANY OTHER NOTEWORTHY INFORMATION ABOUT THE NOMINEE THAT WOULD BE HELPFUL IN THE EVALUATION OF THIS NOMINATION.

NOMINATOR CONTACT INFORMATION, CERTIFICATION AND SIGNATURE

As the nominator, please provide the following:

VIII. FULL NAME:

IX. RELATIONSHIP WITH THE NOMINEE:

X. ADDRESS:

XI. PHONE NUMBER:

XII. EMAIL ADDRESS:

I certify that the information in this nomination is true and correct to the best of my knowledge. I understand that this nomination is subject to review and approval by a committee consisting of the Museum Board of Trustees and four other nominated members. I certify that I have the consent to share such information about other individuals as I have provided herein. I understand that information concerning the Review Committee of this nomination may be kept confidential from me and the public, and I waive any rights of access that I may otherwise have by law.

FULL NAME:

SIGNATURE:

DATE:

DEADLINE FOR SUBMITTING BOTH APPLICATION FORM IS 30 JUNE 2022.

PLEASE DO NOT PAY THE NOMINATION FEES UNTIL YOU RECEIVE A LETTER TO DO SO.

Please submit the nomination form to:

LFOLAAWO@GMAIL.COM

OR

AWOSIKAMUSEUMANDHALLOFFAME@GMAIL.COM

TEL/WHATSAPP: +13013266828 or +2348037190400