HANCOCK COUNTY AGRICULTURE HALL OF FAME Nomination Form

Application to be returned to the OSU Extension Office or The Chamber by February 1

Name of No	minee:			
Date of Birth	1:	Deceased date if applicable:		
Address: _				
			Zip:	
Years as a r	esident of Hancock County:			
Phone Number:		Work Phone Number:		
Education:	High School Attended		Years	
	College Attended		Years	
	Degrees Granted			
Person or or	ganization completing the nomina	ation:		
Contact Nam	ne:			
Address: _				
Phone Number:				
E-mail Addre	ess:			
Family contact name:		Detail on this		
Address: _				
Phone Numb	oer:	Work Phone Number:		
E-mail Addre	ess:			
Nominee's a	rea of involvement: Pr	oducer/Breeder Agricultu	ıral Related	
Number of y	ears this individual has served the	e agricultural industry in Hancock Cou	ınty:	

<u>Plea</u> 1.	Please complete the following questions (if necessary – you may use one additional 8.5" x 11" page per individual) 1. Briefly describe the operation and/or occupation of the nominee.				
2.	Explain contributions nominee has made in service to Hancock County agriculture. (15 points)				
3.	Explain contributions nominee has made in service to agriculture beyond Hancock County. (10 points)				
4.	List Organizations or Association of which the nominee was a member; list offices held and awards received.				
7.	County (15 points)				
	State (15 points)				
	National (5 points)				

5.	List Industry recognitions of individual. (5 points)	
6.	Other activities of nominee in community, church, youth or government. (15 points)	
7.	List this individual's outstanding personal traits. (5 points)	
8.	List this nominee's "Claim to Fame". (15 points)	
l cei	rtify that the above statements are true and accurate	
	Signature	Date