

YMCAs of the Southeast Hall of Fame



at YMCA Blue Ridge Assembly

NOMINATION FORM

Submit completed nominations by March 15, 2023 Please note that no individual may submit more than one recommendation or nomination form in any nomination cycle.

| NOMINEE INFORMATION | | | |
|------------------------|---------------------------|---------------------------------|------------------------------------|
| Name | | <input type="checkbox"/> Living | <input type="checkbox"/> Deceased |
| Birth Date ___/___/___ | Date of Death ___/___/___ | <input type="checkbox"/> Staff | <input type="checkbox"/> Volunteer |

| NOMINEE CONTACT INFORMATION <i>or family representative</i> | | | |
|---|--|------------|-----|
| Name | | | |
| Address | | | |
| City | | State | Zip |
| Home Phone | Work Phone | Cell Phone | |
| Email | Relationship to Nominee (if appropriate) | | |
| Nominee Affiliated YMCA | | | |

| PRIMARY NOMINATOR | | | |
|-------------------|-------------------------|------------|-----|
| Name | | | |
| Address | | | |
| City | | State | Zip |
| Home Phone | Work Phone | Cell Phone | |
| Email | Relationship to Nominee | | |

Please answer the questions below or attach answers on a separate sheet.

| STAFF NOMINEES |
|---|
| Date of YMCA Retirement: |
| YMCA Employment History (include location and dates): |
| 1. |
| 2. |
| 3. |
| 4. |

- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

Discuss any significant development of major initiatives (management or program) or program contributions which are recognized as having advanced the mission and cause of the YMCA within a local community and/or the YMCA Movement in the Southeast.

Please speak to the community impact that this individual has made in their career for the local YMCA and/or the YMCA Movement in the Southeast. In your opinion, why does this individual belong in the YMCAs of the Southeast Hall of Fame?

VOLUNTEER NOMINEES

Please list the YMCA(s) with which this individual has volunteered. Include years of service.

- 1.
- 2.
- 3.
- 4.
- 5.

| |
|---|
| What volunteer positions has this individual held in the Southeast? |
| 1. |
| 2. |
| 3. |
| 4. |
| 5. |
| What were the primary contributions made as a volunteer for the YMCA? |
| |
| How has this person impacted, changed or influenced the local YMCA and/or the YMCA Movement in the Southeast? |
| |

Please email a minimum of two letters of support to attest to the nominee’s life work, character and professional or volunteer impact to Melissa Logan at mblogan@yblueridge.org

Letters of support must come from YMCA volunteers or staff. Please note that no individual may submit more than one nomination in any nomination cycle. No person serving on the selection committee may be nominated for the YMCAs of the Southeast Hall of Fame.

Completed nomination forms and letters should be submitted to:

Melissa Logan, YMCA Blue Ridge Assembly, 84 Blue Ridge Circle, Black Mountain, NC 28711

Completed nominations must be postmarked by March 15, 2023.

Nominators are encouraged to contact Melissa Logan at mblogan@yblueridge.org or 828.210.8459 for assistance at any point during the process of completing a nomination.