

- Coach/Athletic Administrator Nomination Application -

Date:	-	
Name of Nominee:		
Nominee maiden name, if applicable:		
Nominee Current Address:		
Nominee Current Home Phone:	Cell Phone:	
Nominee Email:		
(Include year participated)		
(not included above)		
Post-High School information – college athletics, any other athletic information/participation:		
Nominators Name:		
Nominators Address:		
Nominators Home Phone:	Cell Phone:	
Nominators Email:		
	Please return the application to the OHS Athletic Office	

Email to OHSAthletics@oasd.org or mail to 641 E. Forest Street, Attn: Athletic Department, Oconomowoc, WI, 53066