

SEND TO: MHSCA Hall of Fame Chair—Mark F. Holdren 854 Marshall Street, Portland, MI 48875 OR E-MAIL TO: mholdren.11@gmail.com

Questions: 517-526-4575

INFORMATION REQUEST SHEET

- ⇒ I am including the biographical information that was included with the nomination application to help you complete this "Information Request Sheet." Please <u>DO NOT USE ACROMYNS</u>. Please print carefully. I use the information you provide to help me write your biography for the Hall of Fame KIOSK, induction program, and all Press Releases. **Please return Information Request Sheet by April 15, 2024.**
- ⇒ Send a digital photograph to my email address above or include a 5x7 photograph when you return by April 15, 2024. The MHSCA recom-mends that you provide a professionally completed headshot in business professional to be used for the Hall of Fame KIOSK, induction pro-gram and all Press Releases. (RETURN ALL MATERIALS TO ABOVE EMAIL ADDRESS OR MAILING ADDRESS)

APPLICANT'S INFORMATION:	Date of Retirement (If, applicable):			
Name you wish to see on <u>all</u> Hall of Fame information:				
Home Address:	_ City:		State:	Zip:
Applicant's E-mail:		Phone: _		
What college's did you attend and list degrees earned? Year	?			
CONTACT INFORMATION FOR SCHOOL MOST AFFILIATED:	(This should reflect the school	that will be co	ontacted concern	ing your induction.)
School:		Years at Scho	ool:	
Address:	City:		_ State:	Zip:
Current Athletic Director Name:		Phone:		
Athletic Director E-Mail Address:				

COACHING LONGEVITY: Provide all information for all sports you were hired to coach by a school district during your career. Please <u>do not</u> include club coaching or volunteer coaching activities on this list. You will have an opportunity to site club (non-secondary school) activities later on the application.

	Coaching Level—Sport	School Name—Location	Years Coached (span)	Seasons
E.G.:	Head Varsity—Girls Cross Country	Portland High School—Portland, MI	1990-2011, 2015-2019	25
E.G.:	Assistant Middle School—Wrestling	Portland Middle School—Portland, MI	1995-2015	20

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TEAM RECOGNITIONS & HIGHLIGHTS:		Times	Years
Conference Titles	EG: Girls Cross Country—Capital Area Activities Conference	EG: 5X	EG: 1983, 1984, 1988, 1995, 1997
(include only overall season title recognition)	Sport:		
	Sport:		
	Sport:		
MHSAA District Titles	Sport:		
	Sport:		
	Sport:		
MHSAA Regional/Zone	Sport:		
Titles	Sport:		
	Sport:		
MHSAA State Runners Up	Sport:		
	Sport:		
	Sport:		
MHSAA State Titles	Sport:		
	Sport:		
	Sport:		
Career Win—Loss Record	Sport:	Win:	Loss: Tie:
	Sport:	Win:	Loss: Tie:
	Sport:	Win:	Loss: Tie:
Multi-Team Event Vars	ity Win/Loss Record: Calculating Multi-Team Event Win/Lo	ss Record	d:
	by the place your team was at in a non-dual meet competition finished third, then your team had M-TE wins against all the te		
	d by the place your team was in at a non-dual meet competitic finished third, then your team had M-TE losses against all the		
C. Ties are determined be er team then you hav	by the place your team was at in a non-dual meet competition e one tie.	(individua	al tournament). If your team score is tied with anoth-
Multi Team Event Record	Sport:	Win:	Loss: Tie:
	Sport:	Win:	Loss: Tie:
	Sport:	Win:	Loss: Tie:
Team Other: (EG: MHSAA Sportsmanship Award, Sport Academic Award National Ranking, etc.) Please in- clude year of award.			

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Please provide	any <u>Team Recognition or Highlight</u> that was a special note an	d was not covered on the previous page.
	INDIVIDUAL ATHLETES COACHED AS HEAD	COACH:
	(
MHSAA All State Individuals	(total # of medals only):	
MHSAA Individual State Cha	mpions (total # of medals only): MHSAA Individ	dual Runners Up (total # of medals only):
Name of <u>High School</u> Elite At		
Coached with title (e.g.: Mis leyball, Media All-State, Coa		
lected All-State, National Ho		
Roll, All American)		
Name of alite athletes that u		
Name of elite athletes that we national or international	vere	
CHAMPIONS		
Other:		
other.		
COACH RECOGNITIONS:	Recognition presented by—Name of	the Award—Year(s) Recognized;
Local Area / Newspaper /		
County / All Star		
League		
Association Regional		
Association State		
	+	
National		
Other		
HALL OF FAME RECOGNITION	NS: Name of Hall of Fa	me—Year Inducted
Area/School/Booster Club/ Other		
Sport Association		
National		

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	de any additional information that you would like included that was not covered in previous section, suc
as Club or Volunteer Coaching	Highlights.
	CONTRIBUTIONS TO THE SPORT - Include role or contribution and year(s)
Sport Association Board	
Area Board Member	
League Board Member	
State Committees	
National Committees	
Clinic Presenter	
Other	
Career Coaching Quote and/	or Motto.
*********ONLY LIST A SECOND	SCHOOL IF THERE IS AN EQUAL AFFILIATION TO THE SCHOOL LISTED ON THE FRONT PAGE ************************************
School:	Years at School:
Address:	City: State: Zip:
Current Athletic Director Name:	Phone:
Athletic Director E-Mail Address	;

THANK YOU FOR COMPLETING THE INFORMATION REQUEST SHEET