

**Lincoln Christian University
Athletic Department
Athletics Hall of Fame
Nomination Form**



Name of Nominee _____

Current Address of Nominee _____

Current Phone Number of Nominee _____

Name of Nominator _____

Title of Nominator _____

Phone Number of Nominator _____

LCU Alum? YES NO If yes, grad. Date _____

If no, what college attended _____

Please give a brief explanation of why this group or individual deserves recognition in the LCU Athletic Hall of Fame:

Please mail or fax all nominations to:
Amanda Bowman
Lincoln Christian University
100 Campus View Dr.
Lincoln, IL, 62656
Fax: 217-732-5914
Deadline for nominations is August 1