

ELGIN AGRICULTURAL HALL OF FAME

NAME OF NOMINATOR _____

ADDRESS _____

TELEPHONE _____

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NAME OF CANDIDATE _____

MOST RECENT ADDRESS OF CANDIDATE

RESUME OF CANDIDATE

DATE OF BIRTH _____ **PLACE OF BIRTH** _____

DATE OF DEATH _____ **SPOUSE** _____

Date of Marriage _____

(IF APPLICABLE)

CHILDREN _____

EDUCATION, TRAINING (formal or otherwise - name schools attended)

CHRONOLOGICAL INVOLVEMENT IN ORGANIZATIONS, ASSOCIATIONS, ETC.

AGRICULTURAL ACCOMPLISHMENTS

COMMUNITY OR OTHER ACCOMPLISHMENTS

ADDITIONAL INFORMATION DEEMED TO BE PERTINENT TO THIS NOMINATION

It is understood that the Nominator will assume responsibility for providing as complete as possible, a biography of the successful nominee to ensure proper documentation of the individual for future public reference. A suitable picture to accompany this biography will be provided. All materials so provided to become property of the Elgin Agricultural Hall of Fame, unless clearly stated otherwise at the time of submission.

DATE SUBMITTED _____

SIGNATURE OF NOMINATOR _____

Please forward to:	Elgin Agricultural Hall of Fame c/o Elgin Federation of Agriculture 450 Sunset Drive ST. Thomas, On, N5R 5V1
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APPLICATION DEADLINE: October 31, 2017