Utica High School-Hall of Fame Nomination Application for ATHLETE(S) - HALL OF FAME INDUCTION 2026



(Completed Application must be submitted by June 6, 2025)

Full Name

City/ State Zip

Male _____ Female _____

Address Email

Phone #

UTICA HIGH SCHOOL ATHLETIC HISTORY

Sports Participated in at UHS	# of Varsity Letters earned	Starting Year	Ending Year

Team/Individual Accomplishments

League and MHSAA District, Regional, and State Championships

Sport	Year (s)	Specific Championship

Individual Honors/Awards

Team Captain, All-League, All-County, All-State, etc.

Honor/Award	Sport/Year (s)	Description	

Also, include any other awards/honors you or your team may have received. (Please attach separate sheet if needed)

Describe a memorable moment as an athlete at Utica High School. (Please attach separate sheet if needed)

Describe an influential person that affected your high school athletic experience (Please attach a separate sheet if needed).

IF APPLICABLE: University/College Attended: _____ Graduation Year: _____ Years Attended: _____

University/College Athletic History (if applicable)

Sports Participated in college	# of Varsity Letters earned	Accomplishments/Honors Earned

Please include any other college/university accomplishments

Professional/Olympic Athletic History (if applicable)

Team/Sport	Years	Accomplishments/Honors Earned

IF APPLICABLE:

Coaching Experience:

List School(s) where you have coached Start with Utica High School	Sport Coached & Division	Grade level or Team	Number of Years	Overall record
1				
2				
3				
4				
5				

Were you ever awarded "Coach of the Year"? ____yes ____no If YES, complete the following table.

Year	Sport	Specify County, League, State, etc.

List any other additional coaching honors below (e.g. Hall of Fame, Coaches Association Honors)

Sport	Description

Describe a memorable moment(s) in your coaching career. (Please attach separate sheet if needed)

REFERENCES

AT LEAST ONE LETTER OF REFERENCE SUPPORTING YOUR NOMINATION MUST BE SUBMITTED WITH THIS APPLICATION.

Authorization by Athletic Director

Date submitted _____ Athletic Director Signature _____