

OCEAN COUNTY COLLEGE ATHLETIC HALL OF FAME

NOMINATION FORM

Name of Nominee _____ Phone # _____

Years Attended _____

Grad. Year _____ (if applicable) Degree Earned _____

Grad. Name (if different than above) _____

Address: _____

City: _____ State: _____ Zip: _____

Sports Participated in at OCC	Years	Honors/Achievements
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Additional considerations _____

Name of Nominator _____

Telephone (Day) _____ (Evening) _____

E-Mail Address _____

Please return completed form to:

**OCC Athletic Hall of Fame
Ocean County College-Athletics
College Drive, P.O. Box 2001
Toms River, NJ 08754-2001**

Fax: (732) 255-0408

Phone: (732) 255-0345

E-Mail:athletics@ocean.edu