

Dawahares / KHSAA Hall of Fame Nomination Form

KHSAA Form GE30
Rev. 4/03

Information about Nominee

Name:	JEFF MULLINS
Is the nominee deceased? (circle)	YES <input type="radio"/> NO <input checked="" type="radio"/>
<i>(if nominee is not deceased, please fill out address information below)</i>	
Address:	17605 SPINNAKERS REACH DR. CORNELIUS, N.C. 28031
City, State, Zip	
Phone (list day and night)	704-907-9527

Information about person making nomination (list "self" if self-nominating)

Name:	HARRY O. TODD KHSAA HALL OF FAME 1995
Address:	39 CAROL DR
City, State, Zip	CADIZ, KY 42211
Phone (list day and night)	270-522-0138 CELL 270-889-7947

Important Information Needed for ALL Nominees. This information is important to the Selection Process in helping to ensure that the desired objectives with regard to the consideration of nominees and the induction process is satisfied. (Application will not be accepted without this information)

Please list the primary category of nomination (circle)-

<input checked="" type="radio"/> PLAYER	<input type="radio"/> COACH	<input type="radio"/> OFFICIAL	<input type="radio"/> CONTRIBUTOR
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Birth Date of Nominee	3-19-42
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Sex (circle one)	<input checked="" type="radio"/> Male	<input type="radio"/> Female
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Is the nominee a minority (African American and others) as defined in 2(c)	Yes <input type="radio"/>	No <input checked="" type="radio"/>
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If this person is being nominated as a Coach, please complete the following additional information-

Coached at which High School(s)	
Year of Retirement	
Primary KHSAA basketball region as defined in 2(b)	

(over for remainder of application)

If this person is being nominated as an Athlete, please complete the following additional information-

High School Attended	LAFAYETTE SENIOR - LEXINGTON, Ky.	
Graduation Year	1960	
Primary KHSAA basketball region as defined in 2(b)		

If this person is being nominated as an Official, please complete the following additional information-

Primary Officiating Accomplishments at the High School Level	
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For persons being nominated in all categories, please complete the following additional information

Please summarize this person's accomplishments as a coach, player, official or contributor at the high school level in Kentucky.
MVP BASKETBALL - 1960 MVP KENTUCKY - INDIANA ALL-STAR GAME

Please list any other factors about this individual that you would like for the Hall of Fame Committee to consider.

I certify that I have truthfully completed this information about the nominee with the permission of the nominee, that he/she will accept induction if selected, and I will cooperate with the KHSAA should additional information be needed for his/her consideration.

Signature Jeff Mullins Name (print) JEFF MULLINS Date 8-4-07

Attach any relevant press clippings and materials which would verify coaching win-loss records, or other statistical information. Also attach any other letters of recommendation of other information which may be helpful to the committee in making a final selection.