

Dawahares / KHSAA Hall of Fame Nomination Form

KHSAA Form GE30
Rev. 4/03

Information about Nominee

Name:	Raymond L Webb
Is the nominee deceased? (circle)	YES (NO)
<i>(if nominee is not deceased, please fill out address information below)</i>	
Address:	204 Kholwood Place
City, State, Zip	Frankfort, Ky 40601
Phone (list day and night)	1-502-875-2882

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

Name:	Ray Long
Address:	1230 Elkwood Dr
City, State, Zip	Frankfort, Ky 40601
Phone (list day and night)	1-502-330-6905 — 1-502-695-0545

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)-

PLAYER	COACH	OFFICIAL	CONTRIBUTOR
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Birth Date of Nominee	November 29, 1936
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Sex (circle one)	Male	Female
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Is the nominee a minority (African American and others) as defined in 2(c)	Yes	No
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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)	1964-1965 Asst Coached Anderson Co 1966-1968 Asst Coached Frankfort High 1969-1991 Head Coached Frankfort High
Year of Retirement	
Primary KHSAA basketball region as defined in 2(b)	Section 3

(over for remainder of application)

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

High School Attended	
Graduation Year	
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.	
141-79 Win-Loss Record (OKC) as Head Coach (20 yrs) Won 8 District Titles won 3 Regional Titles won 1 State-Runner-up	Central Kentucky Coach of the Year 1975+1977 Runner-up Pepsi Coach of the Year 1975 Courier-Journal Class A Coach of the Year 1977 North Central Kentucky Conference Coach of the Year 1989

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 Ray Long Name (print) Ray Long Date 10/14/13

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.

Additional information for Raymond L. Webb

Initiated the Wrestling program at Frankfort High School in 1967

Coached the Wrestling team for 22 years

Produced 2 Wrestling State Champion Wrestlers

Co-Manager of the State Wrestling Tournament for 15 years

Member of a high school football officiating team for 16 years

Continues to be a volunteer football and/or wrestling coach at various levels

NOV 01 2006

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Information about Nominee

Name:	RAYMOND L. WEBB
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:	204 KNDLLWOOD PLACE
City, State, Zip	FRANKFORT, KY 40601
Phone (list day and night)	502-875-2882

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

Name:	Key Long
Address:	230 Ellthorn Dr
City, State, Zip	Frankfort Ky 40601
Phone (list day and night)	502-336-1695 - 502-695-0545

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)-

PLAYER	<input checked="" type="radio"/> COACH	OFFICIAL	CONTRIBUTOR
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Birth Date of Nominee	NOVEMBER 29, 1936
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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)	<input type="radio"/> Yes	<input checked="" type="radio"/> No
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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)	ANDERSON COUNTY 1964-1965 (ASST.) FRANKFORT HIGH SCHOOL 1966-1968 (ASST.) FRANKFORT HIGH SCHOOL 1969-1982 1984-1991 (HEAD)
Year of Retirement	1991
Primary KHSAA basketball region as defined in 2(b)	Section 3

(over for remainder of application)

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

High School Attended	
Graduation Year	
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	
--	--

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.	
141-79 Win-Loss Record (CKC) as Head Coach (20 yrs)	Central Kentucky Coach of the Year 1975-1977 Runner-up Pepsi Coach of the Year 1975 Courier-Journal Class A Coach of the Year 1977 North Central Kentucky Conference Coach of the Year 1989
Won 8 District Titles	
won 3 Regional titles	
won 1 State-Runner-up	

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 _____ Name (print) _____ Date _____

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