

Dawahares / KHSAA Hall of Fame Nomination Form

KHSAA Form GE30
Rev. 4/03

Information about Nominee

Name:	Kevin Whitman
Is the nominee deceased? (circle)	YES ☐ NO ☒
(if nominee is not deceased, please fill out address information below)	
Address:	PO Box 75
City, State, Zip	Hazard, Ky 41702
Phone (list day and night)	(606) 233-1498

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

Name:	Rita McIntyre & Dale Mabrey
Address:	1933 Perryville Rd 7404 Granvel Rd
City, State, Zip	Herricksburg, Ky 40330 Lewisville, Ky 40214
Phone (list day and night)	(559) 559-6855 (502) 523-3319

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	September 15, 1956
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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)	M.C. Napier Perry Co. Central
Year of Retirement	
Primary KHSAA basketball region as defined in 2(b)	14th Region

(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.
Please refer to all attached information

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

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 Rita McIntyre Name (print) Rita McIntyre Date 10/21/24

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.