



HALL-OF-FAME NOMINATION FORM – COACH

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: () _____ - _____ Cell Phone: () _____ - _____

E-mail Address: _____

COACHING HISTORY	BOYS	GIRLS
Total years coaching high school soccer		
Total years as high school head coach		
School(s) as high school head coach		
Varsity record		
Conference championships		
Regional Championships		
Sectional Championships		
State Tournament Appearances / Finishes		

IHSSCA/NSCAA Honors: (Coach of the Year; Assistant Coach of the Year; Person of the Year; Sportsmanship)

Service to IHSSCA/NSCAA: (Committees; Coordinator; Officer)

Return Application to:

Jim Konrad

1521 Bonaventure Drive

Naperville, IL 60563