ATHLETE OF THE YEAR NOMINATION FORM

NOMINEE INFORMA	TION			
Name of Nominee:		Gender: _	Male	Female
Telephone (home): ()		Date of Birth:		
Address:		E-mail Address:		
City:	State:	Zip:		
High School:	Cu	mulative Grade Point:		
2 NOMINATOR INFOR	MATION			
Name of Nominator:				
Telephone (home): ()		Email Address:		
Address:				
City:	State:	Zip:		
Total number of year's nominee State Games achievements this y				
In the space below, summarize w will be based on the following criter athletic participation and achieveme involved in sports, why the athlete r	ia: participation in lowa	a Games, attitude and effor or circumstances, athlete's	t, sportsmansh motivation/reas	iip, overall son for being

APPLICATION MUST BE RECEIVED BY AUGUST 10 (of the current year)

Mail to: Iowa Games 1421 S Bell Ave #104 Ames, IA 50010 info@iowasportsfoundation.org