



# THE NYSBA HALL OF FAME NOMINATION FORM 2022

(PLEASE PRINT)

1. **Nominee's Name:** \_\_\_\_\_

(Please circle)      Living or Deceased

2. **Affiliation:** \_\_\_\_\_

(Nominee's employer, residence, phone #, email, etc.)

\_\_\_\_\_

\_\_\_\_\_

3. **Reason for nomination** - fifty (50) words or less (additional materials may be attached):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. **Submitted by:** \_\_\_\_\_

Station(s): \_\_\_\_\_

Contact phone & email: \_\_\_\_\_

**PLEASE scan and email to: [sandy@nysbroadcasters.org](mailto:sandy@nysbroadcasters.org) or FAX (518)456-8943**

**Deadline March 31, 2022**

Decision of the NYSBA Selection Committee is final.