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**Twin County Hall of Fame**

**Nomination Guidelines to be Observed**

A goal of Twin County Community Pride, Inc (TCCP) is to honor citizens of Nash and Edgecombe Counties who have made broad and lasting contributions to the betterment of the community or who have brought recognition to the community through their accomplishments. By recognizing these individuals, the Twin County Hall of Fame will stimulate an interest in and an appreciation for the value of the history of this community and its citizens.

* Any individual or organization civic, charitable, religious, industrial, or professional may enter one or more nominees by following the guidelines provided below.
* The completed form is the primary tool used to determine the merits of each nominee for induction into the Twin County Hall of Fame.
* The Official Nomination Form supplied by TCCP must be used; all information should be typewritten.

**Criteria:**

1. The nominee must have made broad and lasting contributions to the betterment of the community or brought recognition to the community through their accomplishments.
2. The nominee must be or have been a legal resident of Nash or Edgecombe Counties. Exceptions will be considered for non-residents who have had a long and distinguished work history in the Twin Counties.
3. The deadline for submitting nominations to the Twin County Museum & Hall of Fame is April 30th of each year. That deadline will be strictly enforced.
4. All nominations will be considered by the Selection Committee. Inductees will be announced on September 1st of each year and honored at a special ceremony, place and time to be announced at later date.
5. It is the nominator’s responsibility to provide complete and adequate background information on the nominee, including photographs. Articles, speeches, letters, etc. may also be submitted; however, these materials become part of the permanent files and will not be returned.
6. Information on past nominees will be held in the files: however, the names of such persons must be submitted on a current nomination form each year they are to be considered.

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| **Twin County Hall of Fame Nomination Form**  *(Please Use Tab to Move to Entry Fields)* | | | | | |
| **Name of Nominee:** |  | | | | |
|  | *First, Middle, Last (Nickname)* | | | | |
| **Is the Nominee:** |  | Living | |  | Deceased |
|  | *Type/Write an “X” to the Left of Correct Category* | | | | |
| If Nominee Living, Please Provide Following Contact Information: | | | | | |
| **Address (include City, State, Zip):** | | | | | |
| Type address here | | | | | |
| **Telephone Number:** |  | | | | |
| **Email:** |  | | | | |
| **Date of Birth:** |  | | | | |
| **Date(s) of Residency in Area:** |  | | | | |
| **County:** |  | Edgecombe | |  | Nash |
|  | *Type/Write an “X” to the Left of Correct Category* | | | | |
| **Item 1 - Nominee’s Family Background (Include Names of Family Currently Living in Area):** | | | | | |
| Fill and expand, or state “See attached typed document with reference to Item 1 – Family Background” | | | | | |
| **Item 2 - Nominee’s Employment Background:** | | | | | |
| Fill and expand, or state “See attached typed document with reference to Item 2 – Employment Background” | | | | | |
| **Item 3 - Nominee’s Educational Background:** | | | | | |
| Fill and expand, or state “See attached typed document with reference to Item 3 – Educational Background” | | | | | |
| **Item 4 - Outstanding Contributions the Nominee has made (Local, State, National, etc.):** | | | | | |
| Fill and expand, or state “See attached typed document with reference to Item 4 – Outstanding Contributions” | | | | | |
| **Item 5 - Nominee’s Membership in Local/State/National Organizations, including Offices held and Special Recognition or Honors (Civilian & Military, Dates are Helpful):** | | | | | |
| Fill and expand, or state “See attached typed document with reference to Item 5 – Local/State/National Organizations” | | | | | |
| **Item 6 - Nominee’s Membership in Civic/Community/Religious Organizations, including Offices Held and Special Recognitions or Honors (Dates are Helpful):** | | | | | |
| Fill and expand, or state “See attached typed document with reference to Item 6 – Civic/Community/Religious Organizations” | | | | | |
| **Item 7 - Please Share Copies of Additional Items, such as Letters, Speeches, Newspaper Articles, etc., or Any Other Item. No Item should be larger than 8.5” by 11”. Items Will Not Be Returned. Please Indicate Submissions in the Box Below. We cannot accept Framed Items or Plaques.** | | | | | |
| Fill and expand, or state “See attached typed document with reference to Item 7 – Additional Items” | | | | | |
| **Item 8 - Please Mail a High Quality Picture (Black & White, or Color) Suitable for the Newspaper, no larger than 8.5” x 11”, with This Nomination Form, to the Address Below with Additional Documentation. Please Keep Packet to no more than 25 Pages.** | | | | | |
| **Item 9 - Nominator: Please include a Note on Why your Nominee should be in the Twin County Hall of Fame (Attached)** | | | | | |
|  | | | | | |
| **Person/Organization Making Nomination:** | | |  | | |
| **Mailing Address of Contact Person:** | | | | | |
| Type address here | | | | | |
| **Contact Telephone Number:** | | |  | | |
| **Contact Email Address:** | | |  | | |

Please print and mail the nomination form in a sealed envelope to:

**Twin County Community Pride, Inc.**

**P. O. Box 8441**

**Rocky Mount, NC 27804**

All Entries Must Be Received No Later Than 5 p.m. on April 30th of each year.

All materials submitted become property of TCCP, Inc., and the Twin County Museum & Hall of Fame.

For more information call (252) 977-1438

PLEASE NOTE: Twin County Community Pride commissions an original portrait /collage portraying the life of each inductee. It is very important that the inductee or the inductee’s family cooperate with the artist by making available pictures and other memorabilia reflecting the inductee’s accomplishments. These items will be returned by the artist.

**Twin County Hall of Fame Nomination Check List**

*(Please review and initial as a check for completion of Nomination Form)*

Official Nomination Form used with all information typed

Was Nominee a Legal Resident of Nash or Edgecombe Counties?

Only Copies of Letters, Speeches, Newspaper Articles, etc.

Framed Items and Plaques NOT Included

Additional Box 7 Items DO NOT EXCEED 8.5” by 11” (inches)

High Quality Picture of Nominee, NO LARGER THAN 8.5” by 11” (inches) Included

Complete Packet NO MORE THAN 25 PAGES

Completed All Sections of Nomination Form

Nominator’s Note on why you should feel this person should be in the Twin County Hall of Fame

Nomination RECEIVED by a Member of the Board or by Mail to:

TCCP, PO Box 8441, Rocky Mount, NC 27804

By April 30th, 5:00 p.m.

Thank you for taking the time and patience to complete this Nomination Form so we might consider and honor your nominee.

For more information, call (252) 977-1438

Revised 2018