

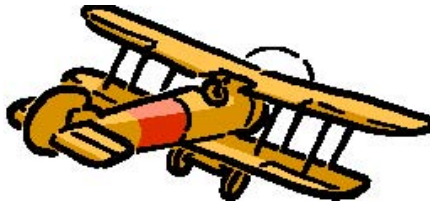


ILLINOIS AVIATION HALL OF FAME

www.ilavhalloffame.org

Casa De Aero Airpark
48W560 Chandelle Drive
Hampshire, Illinois 60140

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HONOREE CANDIDATE DATA

SPONSOR

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____

E-MAIL _____

CANDIDATE

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____

E-MAIL _____

DATE SUBMITTED _____

PLEASE RETURN ALL DATA TO THE ABOVE ADDRESS WITHIN THE NEXT THIRTY DAYS.

HONOREE CANDIDATE DATA

1. Personal information of Candidate:

Name _____ Nickname _____

Date of Birth _____ Pilot Certificate _____ Date _____

Other Ratings _____

Illinois Residency Dates _____ Cities _____

Family Contact (If deceased) Name _____

Relationship to Candidate _____

Address _____ City _____ State _____ Zip _____

Telephone _____ E-Mail _____

2. **Statement as to how candidate's achievements have contributed to the advancement of aviation in Illinois. Please list on separate page.**
3. **Primary employment activities. Please list on separate page.**
4. **Aviation activities beyond employment (volunteer efforts). Please list on separate page.**
5. **Recognition and Awards received (Include copies).**
6. **News articles of candidate (include copies).**
7. **Additional information or comments. Please list on separate page.**
8. **List two references familiar with the activities described.**

Name _____ Telephone _____

Address _____ City _____ State _____ Zip _____

E-Mail _____

Name _____ Telephone _____

Address _____ City _____ State _____ Zip _____

E-Mail _____

9. **Candidate Certification: I hereby acknowledge I am willing to accept the nomination as candidate for the Illinois Aviation Hall of Fame. I certify this information is correct and may be used by the Illinois Aviation Selection Committee. All certification information will be verified.**

Candidate Signature _____ Date _____