

# OAA Hall of Fame Award Nomination Form

**Nominations must be received by September 1.** Please mail your nomination **on this form** to:  
OAA Hall of Fame Committee, 48 N. Emerson Ave, Suite 300, Greenwood, IN 46143

**Additional support paper and support material can accompany nomination form.**  
*Please type or print information below.*



OHIO AUCTIONEERS ASSOCIATION

Name of Nominee \_\_\_\_\_ Home Phone (\_\_\_\_\_) \_\_\_\_\_

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Spouse's Name \_\_\_\_\_

Children: Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Time in auction profession \_\_\_\_\_

% of time spent in the auction profession \_\_\_\_\_

Professional memberships:  OAA  NAA  CAI

Others: \_\_\_\_\_

Educational background, including offices held, current, past: \_\_\_\_\_

List the number of auctions conducted, if any; any specialized area of the auction profession, individual accomplishments in the auction profession and any helpful information which credits the auction profession: \_\_\_\_\_

List 3 individuals who have worked with and have first-hand knowledge of the nominee's ability, character and professionalism. The Chairman will contact these individuals for their recommendations.

Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Please present your personal assessment of the nominee with respect to: honesty; ethical standards; willingness to share with others; respect in his/her community, business, family and professional organizations (attach separate sheet if necessary):

**Submitted by:** \_\_\_\_\_

**Phone** (\_\_\_\_\_) \_\_\_\_\_