

## DEFIANCE COUNTY AGRICULTURE HALL OF FAME GUIDELINES

**The purpose of the Defiance County Agriculture Hall of Fame** is to recognize outstanding contributions by an individual to agriculture. Annual awards to the Hall of Fame will honor individual men or women who have made outstanding contributions to agriculture.

### **Recipients of the awards**

1. Farmer or breeder – one who has made a major contribution from the land and the products thereof.
2. Agriculture related activities – agribusiness

**Number of awards** given in any year may not exceed three and the number of posthumous awards not to exceed one.

**Recipients must have made** their major contributions in Ohio, and should have had long tenure in their field of endeavor, preferably 25 or more years.

**Nominations** may be made by any individual or organization in Ohio by completing a nomination form\* and returning it to the Agriculture Hall of Fame Committee, OSU Extension, Defiance County, 06879 Evansport Rd, Suite B, Defiance OH 43512, by February 15<sup>th</sup>.

**All nominations** must be submitted on a properly prepared form. Such forms will be available through the Agriculture Hall of Fame Committee, via copies at the OSU Extension Office, Defiance Soil and Water Conservation District, or <http://defiance.osu.edu>.

**Selection** each year will be made by the Defiance County Hall of Fame Committee. The decision of the judges shall be final, and to be completed by March 1<sup>st</sup> each year, or as designated by the Hall of Fame Committee.

**The Defiance County Agriculture Hall of Fame Committee** will cooperate with OSU Extension and the Defiance Soil and Water Conservation District in arranging a suitable time, place and method for the awards presentation. The first award presentation will be held at the 2012 Agriculture Appreciation Breakfast.

**The award** shall be determined by the Hall of Fame Committee, with proper citation.

\*If more space is required, an additional 8 1/2" X 11" sheet may be submitted with this form. Any additional information, whether submitted by the nominator or any other individual or organization, will not be accepted. Following selection, the nomination will not be returned. Nominations may be resubmitted.

**NOMINATION DEFIANCE COUNTY AGRICULTURE HALL OF FAME**

Date \_\_\_\_\_

**Defiance County Agriculture Hall of Fame Committee:**

**I wish to submit the following nomination for the Defiance County Agriculture Hall of Fame:**

**Name** \_\_\_\_\_

**Address (if living)** \_\_\_\_\_ **City** \_\_\_\_\_

**State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Birth Date** \_\_\_\_\_ **Place** \_\_\_\_\_ **Date Deceased** \_\_\_\_\_

**Family contact person (circle 1):**    **Wife**   **Son**   **Daughter**   **Other**

**Name of Family Contact** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_

**State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Category (circle one)**

**Farmer or Livestock Breeder**                      **Agricultural-related**

**Approximate years of service in Defiance County:** \_\_\_\_\_

**Education:**    **High School Attended** \_\_\_\_\_ **Years** \_\_\_\_\_

**College Attended** \_\_\_\_\_ **Years** \_\_\_\_\_

**Degrees Granted** \_\_\_\_\_

**Briefly describe the operation and/or occupation of the nominee:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Major activities for which recognition should be given:**

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_

**Explain contributions nominee has made in service to Defiance County agriculture:**

**Explain contributions nominee has made in service to agriculture beyond Defiance County:**

**Explain contributions nominee has made in service to his community, church, youth or government:**

**List Organizations or Association of which the nominee was a member; list offices held and awards received:**

- County
  
- State
  
- National

**Outstanding personal traits:**

**List this nominees "Claim to Fame":**

**As nominator I certify that the above statements are true and accurate.**

**Signed** \_\_\_\_\_

**Printed Name** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_

**State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Please enclose a photograph of the nominee suitable for enlargements. (Will be returned)**

**Applications are due to the Defiance County Extension Office, 06879 Evansport Rd, Suite B, Defiance, OH 43512, by February 15<sup>th</sup>.**