



## HALL OF FAME CRITERIA

### PURPOSE

To honor individuals, teams, and organizations from Illinois who have significantly contributed to the growth, development, and promotion of softball.

### ELIGIBILITY

Candidates for induction into the Illinois State Softball Hall of Fame must meet the following criteria:

- **Players/Teams:** Must be retired from competition in Illinois for **at least 3 years**. Participation in Masters-level or recreational play does **not** affect eligibility.
- **Other Categories:** Includes managers, umpires, sponsors, media, and commissioners
- Candidates must meet Hall of Fame criteria outlined below.

### SELECTION CRITERIA

Selection will be based on the candidate's overall contribution to the game, including excellence on the field, dedication to the sport, and influence at the local, state, or national level. Consideration will include:

- **Playing Career and Achievements**
  - Length of playing time and consistency of performance.
  - State-level recognition is required; national recognition enhances candidacy.
  - All-Tournament selections (preferably 2–3 times) are highly valued.
  - Competition against nationally recognized teams from outside Illinois strengthens a candidate's case.
- **Character and Contributions**
  - Must be a credit to the game **both on and off the field**.
  - Contributions to Illinois softball at the local, state, or national level are important.
- **Special Qualifications**
  - Any candidate **inducted into the National USA Softball Hall of Fame** automatically qualifies for the Illinois State Hall of Fame.
  - Letters of reference, factual documentation, and supporting materials (e.g., scrapbooks, newspaper clippings) are required for consideration, except in unusual circumstances.
- **Length of Service**
  - For non-player contributions (sponsors, umpires, managers, media, commissioners), **12–15 years** recommended for consideration.
- **Nomination and Resubmission**
  - Candidates not accepted may be resubmitted the following year.
  - A third year of consideration may occur at the discretion of the Executive Committee.

- Committee members are encouraged to maintain files on all nominees for future reference.

## **AWARDS**

- Inductees will receive a **custom designed plaque** from the Illinois State Softball Hall of Fame Committee.

## **PRESENTATION**

- Announcements of each year's award recipients will be made by the Hall of Fame Committee. All selected individuals will receive an official notification letter.
- For individuals not selected for induction, the person who submitted the nomination will be notified, and the nomination may be reconsidered in future years.
- Press releases and feature stories may be distributed to the inductee's home area, as directed by the Area Commissioner.
- Awards will be formally presented at the Annual Hall of Fame Banquet.

## **NUMBER OF INDUCTEES**

- Each Commissioner may nominate **up to two (2) candidates** from their area or from anywhere within the state.
- All nominations must be submitted on the official nomination form.
- It is recommended that each commissioner form a local committee to assist in identifying and selecting nominees. This process helps ensure that deserving players – including those active prior to the committee member's tenure – receive appropriate recognition.

**CONTACT - Please send complete information before **April 30, 2026****

**USA Softball of Illinois Hall of Fame Chair  
Jessica Milligan  
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Decatur Area Convention & Visitors Bureau  
202 East North Street  
Decatur, IL 62523  
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HALL OF FAME APPLICATION FORM

DATE: \_\_\_\_\_

NOMINEE NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ CITY STATE ZIP

CATEGORY:

- PLAYER
- TEAM
- MANAGER
- UMPIRE
- SPONSOR
- MEDIA
- COMMISSIONER

RECOMMENDED BY:

NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ CITY STATE ZIP

REFERENCES: TWO REQUIRED

1. NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ CITY STATE ZIP

2. NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ CITY STATE ZIP

ENCLOSURES:

- Application form
- Letter of recommendation
- Two reference letters
- News articles (if available)
- Photos (if available)

CAREER STATISTICS:

- Number of years of dedication
- Win-loss record
- Batting average.

Any other pertinent information that would be helpful to the committee.

THANK YOU SO MUCH!