

**KANSAS LAW ENFORCEMENT TORCH RUN  
BENEFITING SPECIAL OLYMPICS**

**Richard LaMunyon Hall of Fame**

**PURPOSE:**

The Richard LaMunyon Torch Run Hall of fame was created to recognize outstanding individuals who have significantly contributed to the statewide success of the Kansas Law Enforcement Torch Run benefiting Special Olympics

**SELECTION:**

Nominations may be submitted by individual members of the Kansas Torch Run program. All nominations should include a completed nomination form and provide a minimum one (1) letter of recommendation. The letter of recommendation must be from a person(s) who have worked with the nominee in their LETR efforts.

There may be (1) inductee per year. In the event of a tie, years of service will serve as tie breaker.

**CRITERIA:**

The nominee's involvement must demonstrate a sustained and significant contribution to the achievement of the goals of the Kansas Law Enforcement Torch Run. The minimum requirements for this award are at least five (5) years of participation with the Kansas Torch Run, outstanding achievement in program development, organization and fundraising success.

**PROCESS:**

Nomination forms must be sent in and postmarked by April 1st of each year and sent to:

Special Olympics Kansas  
5280 Foxridge Drive  
Mission, KS 66202  
Phone: (800) 444-9803  
Fax: (913) 236-9771

All nomination forms are then sent to the Hall of Fame selection committee. A committee will be appointed with the State Torch Run Director, being the Chair, unless he has not been inducted into the Hall of Fame. In that case, a current Hall of Fame member will be appointed as Committee Chair, by the State Director. The remaining members of the committee will be appointed by the Kansas Executive Council, from past Hall of Fame inductees, still active in the Torch Run. The committee shall consist of at least three (3) Hall of Fame members.

Nominees that are not selected will remain in consideration for three (3) years and will be considered automatically for this time period unless inducted. Supportive nominee information may be supplied each year. At the end of three (3) years, nominees' files will be removed unless re-nominated.

All nominations or inductees will be kept confidential with inductees being announced at the Kansas Torch Run Summer Games Ceremony or location as deemed appropriate by Committee.

**The following is a *recommended* weighting system in selecting an inductee:**

1. Years of involvement, minimum 5 years, 1 point for each year of involvement
2. Positions held, accomplishments, lengths of service, money raised, sponsor acquired, etc.

		<b>Maximum Pts:</b>
A.	Local Involvement	20 pts.
B.	State Involvement	20 pts.
3.	Nominee's Involvement With Special Olympics	20 pts.
4.	Impact on the mission of the Torch Run	15 pts.
5.	Nominator's additional comments	10 pts.
6.	Letter(s) of recommendation	10 pts.
TOTAL		95 pts. <u>+ Years of service</u>
<b>Total Points</b>		_____

**NOMINATION FORM MUST BE ACCOMPANIED WITH ONE LETTER OF RECOMMENDATION FOR CONSIDERATION.**

**NOMINATIONS MUST BE POSTMARKED BY April 1st AND SENT TO:**

**SPECIAL OLYMPICS KANSAS  
C/O LAW ENFORCEMENT TORCH RUN  
5280 FOXRIDGE DRIVE  
MISSION, KS 66202**

**Or emailed to [letr@kssso.org](mailto:letr@kssso.org) by April 1st**

**KANSAS LAW ENFORCEMENT TORCH RUN BENEFITING SPECIAL OLYMPICS**

**RICHARD LAMUNYON HALL OF FAME  
NOMINATION FORM**

Your name: \_\_\_\_\_ Day Phone: (\_\_\_\_) \_\_\_\_\_

Organization/Area: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

County: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Nominee Information

Name: \_\_\_\_\_ Day Phone: (\_\_\_\_) \_\_\_\_\_

Organization/Area: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

County: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

1. How many years has the nominee been involved with the Torch Run? \_\_\_\_\_

2. Please list the nominee's involvement with the Torch Run. Please be specific and highlight activities, positions held, accomplishments, length of service, etc.

a. Local involvement (town, city, county): \_\_\_\_\_

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

b. State or National involvement: \_\_\_\_\_

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

c. International involvement: \_\_\_\_\_

\_\_\_\_\_

3. What personal qualities or traits does this individual possess that you feel qualifies him/her as a nominee?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. What impact has this person had on furthering the mission of the Torch Run?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Please list other information you believe the selection committee should know about the nominee.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_