CENTRAL SQUARE HIGH SCHOOL

Athletic Wall of Fame

# Mission Statement

It is the mission of the Central Square High School Athletic Wall of Fame Committee to:

1. Recognize and celebrate the accomplishments of outstanding athletes, coaches, administrators, and Redhawk supporters.
2. Reconnect those individuals and their families with the Central Square High School.
3. To deepen the current student-athletes understanding and appreciation for the history of Central Square athletics by seeking their participation.



**CENTRAL SQUARE HIGH SCHOOL**

**ATHLETIC WALL OF FAME**

**INFORMATION SHEET**

**Categories of Nomination**

1. ATHLETE – An athlete must have graduated from Central Square a minimum of seven (7) years prior to nomination.
2. COACH – A coach must have a minimum of 10 years of service in the District and must be retired at time of nomination.
3. ADMINISTRATOR – An administrator must have a minimum of 10 years of service in the District.
4. COMMUNITY SUPPORTER – Must have a minimum of 10 yrs. involvement in the Central Square athletic program.

**Qualifications of Nominees**

| **ATHLETE** | **COACH** | **ADMINISTRATOR** | **COMMUNITY SUPPORTER** |
| --- | --- | --- | --- |
| Level of competition | Level of competition | Leadership | Community involvement |
| Leadership | Leadership | Impact on athletic program | Impact on athletic program |
| Impact on athletic program | Impact on athletic program | Sportsmanship/citizenship | Sportsmanship/citizenship |
| Honors/awards | Honors/awards |  |  |
| School record holder | School record holder |  |  |
| Graduated from P.V.Moore | Sportsmanship/Citizenship |  |  |
| Sportsmanship/citizenship | Coached for at least 10 years @ CS |  |  |
| Interscholastic participation | Must be Retired |  |  |

Please mail to:

Central Square Athletic Office

Stephanie Hall, Secretary

44 School Drive

Central Square, NY 13036

**Athletic Wall of Fame**

**Nomination Form**

Deadline for Nomination: October 4, 2024

CATEGORY OF NOMINATION (check one)

Former Athlete \_\_\_

Coach/Administrator \_\_\_

Community Supporter \_\_\_

Nominee’s Name:

Nominee’s Current Address:

Nominee’s Phone #:

Nominee’s Email:

Nominee’s Years at Central Square and Graduation Year if applicable:

Rationale for Nomination:

Nominated by:

Name: Relationship to nominee:

Address:

Phone #:

Email:

Signature:

Thank you for your nomination! Your nominee will receive a letter from the Athletic Office requesting further information so that the committee can make their final decision. Once the decision has been made, nominees will be notified.