

JOHNSON CITY ATHLETIC HALL OF FAME

Nomination Form

Please check all that apply:

Athlete – Candidates become eligible 5 years after graduating from Johnson City High School.

Coach – Must have served as a Varsity high school coach in Johnson City and is now retired.

Contributor – A person who has helped develop or foster athletics in Johnson City.

Legacy Team – A varsity team that best represents Johnson City Athletics through excellence.

*Complete **ONLY** sections IX and X on the following form.*

Section I -- Be as accurate as possible

Application Date: _____

Nominee's Name _____

Present Address _____

E-mail _____

Current Phone Number _____ Cell # _____

If Nominee is deceased please include contact information of a family member we can reach.

Contact Name _____ Relationship _____

Address _____

Email _____

Phone Number _____ Cell # _____

Section II -- List all sports the nominee participated in/coached while at Johnson City including the years played/coached. Example: Football – player – QB – 1963 thru 1965.

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Section III – List all teams the nominee participated in/coached beyond JCHS (college, prep school, professional career). Example: Syracuse Univ. football, player, 1984 thru 1987.

Section IV – List all Honors and Awards. Example: All-County, All-Conference, All-State, varsity letters earned, MVP, All-Pro, All-Star games etc.

Section V – List individual career stats. Example: baseball , batting avg., slugging percentage, win/losses or football, yards rushing, yards receiving, # of tackles, TD's, wins/losses etc.

Section VI – List established records held by nominee – specify high school, college, professional, etc.

Section VII – List in detail nominee's contribution to Johnson City athletics-- such as youth coach, team sponsorships, league official, program founder, board member. Please include years served and position if any. Example: JC Little League coach – 1992 thru 1997 or JC Pee Wee football, president 1998.

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Section VIII – List any other contributions to Johnson City Athletics, the community and the school. Include any additional achievements worthy of consideration.

Section IX -- Legacy Team Award

Name of Team _____

Year(s) of excellence _____

Team Record (won –loss) _____

Head Coach _____

Assistant coaches :

Team Captains _____

Key participants and why?

Team accomplishments:

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Section X – Why do you believe this individual/team should be included in the Johnson City High School Athletic Hall Of Fame?

Add additional sheets if necessary and be as detailed and accurate as possible when completing this form.

Include copies of news articles, copies of team pictures, copies of team awards, game and season statistics, etc. Please do not send originals.

To the best of my knowledge, the above information is correct and as accurate as possible.

Name of person submitting application _____

Address _____

Email _____

Phone Number _____ Cell# _____

Return this application to:

Jeffrey Paske

Director of Health, PE, and Athletics

Johnson City Central Schools

666 Reynolds Road

Johnson City, New York 13790

jpaske@jcschools.stier.org

For committee use only:

Reviewed: _____

Comments: _____
