

GROTON CENTRAL SCHOOL

DISTINGUISHED GRADUATE HALL OF FAME

Nominee's Name _____

Address _____

Phone _____

Work phone _____

Year of graduation _____

Name when enrolled at GCS _____

E-mail _____

Sponsor's Name _____

Address _____

Phone _____

Work phone _____

E-mail _____

Education/Training/Degrees _____

Please describe the nominee and his/her accomplishments by answering the questions below. **Feel free to attach information with your completed application.** Please outline the nominee's professional career.

Please list and describe the nominee's previous awards, recognitions, appointments, titles, etc.

Please outline the nominee's community/charitable involvements or Groton School District contributions (if applicable).

In the space below, please tell us why you feel this person should be considered for the Hall of Fame. _____

Applications should mailed to:

Groton HS Chapter of the NHS
Groton Senior High School
400 Peru Road
Groton, NY 13073



*Additional application forms can be downloaded at <http://www.grotoncs.org>