

PHSAA Distinguished Alumni Award

Criteria- nominee must:

1. Have notably distinguished themselves by their extraordinary contributions and/or remarkable accomplishments in their chosen career, in civic duties, in military service, in philanthropy, in volunteerism, in the arts, in the sciences, in the environment, in education, in athletics, or in public service. Be distinguished in his or her chosen business, profession or life's work.
2. Be a person of such integrity, stature, demonstrated ability and renown that the alumni, administrators, teachers and students of PHS will take pride in, and be inspired by, his or her recognition.
3. Have demonstrated a continuing interest in PHS and is a member of PHSAA.
4. Be an individual who, in deed or action, reflects and recognizes the importance of his or her education at PHS, who demonstrates pride in the school, and whose interest and loyalty are evident.
5. Have graduated at least 20 years prior to nomination.

Nominations will be considered by a committee comprised of PHSAA board members. The selected nominee's name and credentials will be reviewed by the PHS principal and Palestine School District superintendent or their designees. The number of recipients each year is at the discretion of the committee though generally there will be no more than one. There is no requirement that an award be given every year. Nominations will remain on file for five years. The committee will meet after the August PHSAA Board meeting to review nominations. If an award is given, the Distinguished Alumni award may be presented at the PHSAA annual meeting.

Please tell us about the person you would like to nominate...

Name _____ Class Year _____

Address _____

City, State, Zip _____

Phone(s) - Home _____ Cell _____ Work _____

Email _____

Tell us why you are recommending this nominee. Attach any newspaper or magazine articles or clippings.

Also, tell us about yourself...

Nominator should be a member of PHSAA.

Nominator Name _____ Class Year _____

Nominator Address _____

Nominator City, State, Zip _____

Nominator Phone(s)-Home _____ Cell _____ Work _____

Nominator Email _____

Submission Date _____

Received Date _____

Send completed nomination form to:

PHSAA
P.O. 3406
Palestine, TX 75802