Wall of Dedication Nomination Form

Nominee	
Address	
Phone	Date
	llowing information. Please answer all the questions as ide any supporting materials that can be used to help in the
	ated employed volunteered
at the Mayfield Central Scho	ool District. (Please circle all that apply.)
a) Making a significant cb) Going above and beyoc) Being a positive role n	· · · · · · · · · · · · · · · · · · ·
· ·	ts or significant contributions did this nominee make to his/her neral, that show this individual should be selected for the Wall
	ave frequently demonstrated educational pride and positive ninee demonstrated these qualities?

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5) In what way has this person served as positive role model in his/her community?
6) Please feel free to include additional information that may shed a light on the worthiness of your candidate for this honor.
Sponsor's name (please print)
Sponsor's signature Sponsor's address
Sponsor's phone Notes 1) Please complete all areas, which you feel pertinent to the nomination. 2) You may attach any pertinent material (photocopies, press clippings, pictures) 3) Please do not include original items that are irreplaceable.
3) Please do not include original items that are irreplaceable.4) Nominations must be received by June 14.

Please submit complete nomination form to:

- 1) Vanessa DiNitto at dinitto.vanessa@mayfieldcsd.org or Ernie Clapper at eclapper@nycap.rr.com OR
- 2) Mailing or dropping off to the District Office: 27 School Street, Mayfield, NY 12117