

WYOMING HIGH SCHOOL ACTIVITIES ASSOCIATION

731 EAST 2ND STREET
CASPER, WYOMING 82601-2620

WYOMING SPORTS OFFICIALS ASSOCIATION

HALL OF FAME

The Wyoming Sports Officials Association (WSOA) with the Wyoming High School Activities Association (WHSAA) is pleased to be sponsoring a Sports Officials Hall of Fame. The Hall of Fame provides special recognition to individuals who have contributed greatly to the youth of Wyoming through their sports officiating. Induction into the WSOA Hall of Fame will occur each year.

Instructions

1. Any Wyoming resident or Wyoming local official's association is eligible to nominate an official for induction into the WSOA Hall of Fame.
2. Submit a current photograph of the nominee.
3. The nomination form and photograph shall be retained by the WSOA board.

Criteria

1. A nominee maybe retired from or currently officiating to be eligible for selection into the WSOA Hall of Fame.
2. A nominee must have been registered with the WHSAA for a minimum of 15 years, unless special circumstances apply.
3. A nominee must have displayed high moral character, outstanding citizenship, and the ideals embodied in the WSOA Code of Ethics.
4. Consideration is given to nominees who have served in more than one sports area throughout their career.
5. Various levels of competition the nominee officiated, i.e., district and state tournament officiating will be considered. Here, not only is the number of tournaments used, but also more consideration to state tournament level than district tournament level.
6. Consideration showed to a nominee who has received National Federation of Interscholastic Officials Association awards and any other WSOA/WHSAA recognition's.
7. The nominee must have shown professional service by serving as an officer of a local, state, or national sports officials' board/association.

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Official Nomination Form

Nominee Information

Name _____ Date Submitted _____
First Nickname Middle Last

Current Address _____
Street or PO Box

City _____ State _____ Zip _____

Phone (____) _____ E-Mail _____

Date of Birth _____ Place of Birth _____
City State

How many years of officiating for the WHSAA? _____

Date of Death _____
(If Applicable)

Name of Spouse or Closest Living Relative

Name _____

Address _____
Street or PO Box City State Zip

Phone (____) _____ E-Mail _____

Individual Submitting Nomination Information

Name _____

Relationship to Nominee (Relative, colleague, etc.) _____

Address _____
Street or PO Box City State Zip

Phone (____) _____ E-Mail _____

Signature _____

3. Special honors and achievements. (Include involvement with and awards received in local, state, or national organizations.)

4. Why should this nominee be considered for induction into the WSOA Hall of Fame?

RETURN COMPLETED FORM TO:

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