

Nomination form
Academic All-State Team
 Sponsored by the Missouri Basketball Coaches Association

Player Name: _____ boy girl

School: _____

Player's Home Phone: _____

Coach's Name: _____

Coach's
 Phone: _____
 School home cell

Coach's E-Mail: _____

The individual being nominated for Academic All-State must meet the following qualifications:

1. Senior standing
2. Started 90% of his or her team's games or played in 75% of the total team quarters played.
3. Possesses outstanding moral character.
4. Has ONE OR MORE of the following verified minimum scores:
 - A. ACT score of 27 composite or above
 - B. SAT score of 1920 composite or above
 - C. PSAT score of 185 selection index or more
5. Grade-Point Average of 3.25 out of possible 4.0 (or equivalent on alternate grade scale)

Please List Senior Season Basketball Statistics: PPG_____ RPG_____ APG_____ SPG_____ FT%_____ FG%_____ Other_____

---SCHOOL PRINCIPAL MUST VERIFY ALL OF THE APPLICABLE ITEMS---

Coach's
signature: _____
Principal's
signature: _____

---AN OFFICIAL TRANSCRIPT MUST ACCOMPANY THIS NOMINATION---

All student-athletes who meet ALL of the required criteria will be honored as members of the Missouri Academic All-State team. Please send additional information to your district representative. YOU MUST BE AN MBCA MEMBER TO NOMINATE FOR THE ACADEMIC ALL-STATE TEAM. Mail all nominations to the following address by March 15, 2016:

Shawn Erickson, MBCA Office
 14860 State Road DD
 Festus, MO 63028