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. Player in good standing with team.
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:

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

COACHES: THERE IS A LATE FEE OF $10 EXTRA TO BE ADDED TO YOUR MEMBERSHIP IF YOU JOIN AFTER FEBRUARY 1!