IHSBCA Academic All State Nomination Form

Player's Name: _____ School: _____

Player's Address: _____ Player's Cell: _____

Player's City: _____ Player's Zip: _____

Coach: _____ Coach's Cell: _____

The nominee must: **Be a SENIOR. **Be a starter in 90% of games or a pitcher in the rotation.
**Have a GPA of 3.4/4 or higher **Be a postive representative of his school and community

Grade Point Ave: _____ --out of _____

ACT Score: _____
The ACT score is NOT required.
Record your player's ACT score at your discretion.

Verified by: _____
(Principal or Superintendent)

Class: 4A _____ 3A _____ 2A _____ 1A _____

Please mark with an "X" for each category that applies to the nominee:

_____ Member of the National Honor Society _____ Class Officer _____ Student Council

Please circle other awards the nominee won:
National Merit Scholar Bernie Saggau Award Des Moines Register Academic All State Iowa Governor's Scholar

Please circle and list the number of **sports the nominee played his senior year:** 1 2 3 4+

List sports: _____ _____ _____ _____ _____

Please circle and list the number of school sponsored activities, **(non-sports)**, the nominee participated in as a senior.
Examples are: band, school play, choir, etc. 1 2 3 4+

List school activities: _____ _____ _____ _____ _____

Please circle the number of **activities, outside of school**, the nominee was involved in during his senior year.
Examples are: 4-H, FCA, scouting, church youth groups, etc. 1 2 3 4+

List non-school activities: _____ _____ _____ _____ _____

Please circle the baseball honors the nominee has earned in his high school career. (circle all that apply)

Earned 1st or 2nd Team **All Conference Honors** as a:	Junior	Sophomore	Freshman	8th Grader
Earned 1st or 2nd Team **All District Honors** as a:	Junior	Sophomore	Freshman	8th Grader
Earned 1st or 2nd Team **All State Honors** as a:	Junior	Sophomore	Freshman	8th Grader

Positions played _____

	AB	Hits	RBI	2B/3B/HR	AVE	SB	W - L - S	ERA	IP	BB	K's
2024											
2025 (to date)											

Mail to: Lee Toole 301 Wildwood Road Council Bluffs, Ia 51503 ***Fax: (712) 366-8324***
Text a cell phone photo of this form to: 402-689-8271 ***Email: Toolehome@hotmail.com***