

OKSSCA ACADEMIC ALL STATE INFORMATION FORM

Oklahoma Slowpitch Softball Coaches Association

The OKSSCA has implemented an award for the 2011-2012 school year. Our goal as an association was to recognize those athletes who are not only successful on the playing field, but those who excel in their academic endeavors as well. For the first time in the history of our association, we will be awarding an Academic All State award to those seniors who meet certain academic criteria. It was decided that these criteria be set high to truly make this award an academic honor. The recipients of this award will receive a certificate recognizing their accomplishments. All nominees who meet the criteria and complete the nomination form completely and by the deadline will be awarded this honor ó THERE IS NO FURTHER SELECTION PROCESS!

All nominees must meet the following criteria to be eligible to receive OKSSCA Academic All State status:

- Player must have received a National ACT composite score of 25 or higher on a nationally recognized test date
- Player must be a senior and must have appeared on the school's varsity roster for the spring season
- ALL information on the nomination form must be complete (including all signatures and school seal)
- Nomination forms must be postmarked no later than May 4, 2012
- Head coach must be a member of the association

Any questions regarding the award or nomination form should be directed to:

Mike Lawless
lawlessm@colbert.k12.ok.us
1-580-775-7686

Jennifer Matthews
matthewsj@konowa.k12.ok.us
1-580-272-3860

OKSSCA ACADEMIC ALL STATE NOMINATION FORM

Oklahoma Slowpitch Softball Coaches Association

NOMINEE NAME: _____ POSITION _____

MAILING ADDRESS OF NOMINEE:

HOME PHONE #: _____ CELL PHONE #: _____

HEAD COACH'S NAME: _____

COACH'S PHONE #: _____ CELL PHONE #: _____

SCHOOL NAME: _____ SCHOOL PHONE #: _____

SCHOOL ADDRESS: _____

NATIONAL ACT COMPOSIT SCORE: _____

DATE TESTED: _____ TEST SITE: _____

SCHOOL COUNSELOR: _____

SCHOOL COUNSELOR'S SIGNATURE: _____

DATE: _____

HEAD COACH'S SIGNATURE: _____

DATE: _____

Mail to: Jennifer Matthews
c/o Konawa High School
701 W. South Street
Konawa, OK 74849

OFFICIAL SCHOOL SEAL