Section 2 Boys Basketball
2027 Scholar Athlete Awards Nomination Form

(Note: One Athlete Per School - School May Only Nominate One Athlete!)

NAME: _____ Date: _____
(Please Print Legibly)

ADDRESS: _____ Telephone #: _____

_____ Height: _____ Weight: _____

EDUCATIONAL BACKGROUND

High School: _____ Graduation Date: _____

_____ League/Affiliation: _____

College: (Note schools you have applied to, been accepted at and school you will be attending)

Schools: Applied to:	Accepted at:	Attending:
_____	_____	_____
_____	_____	_____
_____	_____	_____

ACADEMIC RECORD

(Athlete must attach Transcript Copy – Athlete will not be accepted without Transcript)

Class Average: _____ Academic Honors:

_____

Class Rank: _____ _____

_____

Class Size: _____ _____

ACT/SAT Scores: V _____ M _____ ACT _____

BASKETBALL EXPERIENCE AND PARTICIPATION

Grade/Yr	Level	Coach	Points/Game	Rebounds	Assists
9 - ___	_____	_____	_____	_____	_____
10 - ___	_____	_____	_____	_____	_____
11 - ___	_____	_____	_____	_____	_____
12 - ___	_____	_____	_____	_____	_____

Athletic Honors: _____

_____

(OVER)

DON'T FORGET ATHLETE'S TRANSCRIPT

Related Activities and Basketball Experiences
(Include Sports, Community, Recreational, Work, etc.)

_____

_____

_____

_____

_____

_____

_____

Coach's Statement
Please comment on scholar-athlete's character, basketball ability, attitude, Coachability, toughness, skill level, college potential, etc. (May be done under separate cover.)

_____

_____

_____

_____

_____

I attest that the above information is accurate and correct (All signatures are required below):

Principal: _____ Date: _____

Athletic Director: _____ Date: _____

Coach: _____ Date: _____

Scholar-Athlete: _____ Date: _____

PLEASE RETURN (by Email or Mail) on or before FEBRUARY 14th, 2027
RETURN TO: Will Ferguson, 60 June Street, Valatie, NY 12184 or Email: will56@nycap.rr.com

One Athlete Per School - School May Only Nominate One Athlete – SENIORS ONLY
ATHLETE'S TRANSCRIPT IS REQUIRED