

Please return nomination form to Nebraska Coaches Association (fax 402-434-5689 or email saundi@ncacoach.org) by Thursday, February 20.

Player NAME: _____ Uniform # _____ Position(s): 1 2 3 4 5

Player SCHOOL: _____ CLASS: A B C D Height _____

Player Home Address: _____ City/ZIP: _____

Player Email Address: _____ Player Phone #: _____

The advisory committee has requested statistics on the player you nominate. Please fill in the information where applicable.

Career 2 pt% _____ 3 pt. % _____ FT% _____ Pts/Gm _____ Reb/Gm _____ Assists/Gm _____ Steals/Gm _____ Blocks/Gm _____

Sr Year 2 pt% _____ 3 pt. % _____ FT% _____ Pts/Gm _____ Reb/Gm _____ Assists/Gm _____ Steals/Gm _____ Blocks/Gm _____

Your validation & responsibility as a coach: I hereby certify that the above player is a senior and will graduate from high school by June, 2020. I recommend this player as being of exemplary character on and off the field. **If this player is selected, I understand I will be asked to assist in securing \$250.00 for this player's participation in the All-Star camp.**

(HEAD coach signature required)

(please print name)

Nominate a coach for the All-Star game _____
Name School

BBB