

Academic All-State

Nomination Guidelines

And Application

**Academic All State Nomination Instructions/Requirements:**

**Applications and all required forms must be received by TCAF office within ten days of the All-State Team Selection.**

* **Full time Student or Home-Schooled Athlete that are members of a TCAF school and meet all TCAF requirements.**
* **Must be Junior or Senior**
* **Must have cumulative GPA of 3.5 or above on a 4.0 grading scale.**
* **Must be of good moral character**
* **Students must achieve the following to be eligible for Academic All-State team:**
1. **Baseball**

\* First Team All-District

\* Second Team All-District

 2**. Basketball**

 \* First Team All-District \* Second Team All-District

 3. **Cross Country**

 \* Top 10 at State Meet

 4. **Football**

 \* First Team All-District \* Second Team All-District

5. **Golf**

\* Qualify for the state tournament \* Individual or Team Member

 6**. Soccer**

\* First Team All-District \* Second Team All-District

 7. **Softball**

 \* First Team All-District \* Second Team All-District

8. **Tennis**

 \* Qualify for State Tournament

 9. **Track and Field**

 \* Qualify for State Meet \* Individual or Relay Team Member

10. **Volleyball**

 \* First Team All-District \* Second Team All-District

**Awards**

* Academic All-State Team listed on the TCAF website
* Academic All-State Certificate

**TCAF Academic All State Application Form**

**Academic All State Requirements:**

* **Full time Student at TCAF school**
* **Must be Junior or Senior**
* **Must have a cumulative GPA of 3.5 or above on a 4.0 grading scale.**
* **Must be of good moral character**

|  |  |
| --- | --- |
| Student Athlete Name: | School Name: |
| School Address: | City, Zip |
| Coach: | Coach’s Email: |

Class Rank \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Athlete’s GPA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Send copy of Athletes transcript)

Coach’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ACADEMIC ALL-STATE NOMANATIONS MUST BE RECEIVED WITHIN 10 DAYS AFTER ALL STATE SELECTIONS.

**PLEASE CHECK TO BE SURE THAT THE APPLICATION IS COMPLETE AND OFFICIAL TRANSCRIPT SHOWING CLASS RANK AND CUMULATIVE GPA IS INCLUDED BEFORE MAILING TO THE ADDRESS BELOW:**

**Mail to** :

CSAF, Inc.

P.O. Box 136175

Ft. Worth, Texas 76136