Criteria for Academic Team of the Year

1. The nominating form must be signed by the college registrar and the athletic director. The form must also contain the college seal.

2. Each student-athlete listed on the eligibility form that finishes the season with the team will be used to figure the team’s overall grade point average.

3. In computing the final grade point average, all course hours attempted must be included with the exception of remedial/developmental course work, which cannot be used to meet the requirements for this award.

4. Transfers get computed, including hours earned at previous college.

5. All hours need to be computed, including F’s.

6. All nominating forms are due to the MACJC office on June 15th.

7. All teams with 2.5 grade point averages or higher can be nominated.

8. The team with the highest cumulative grade point average in each sport will be Academic Team of the Year for that sport.

MACJC ACADEMIC TEAM OF THE YEAR
NOMINATION FORM

SPORT________________________________________

COLLEGE________________________________________ DATE ________________________________

# OF ATHLETES ON TEAM__________ CUMULATIVE GPA FOR TEAM__________Based on 4.0

<table>
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<tr>
<th>Name</th>
<th>Hours Attempted</th>
<th>Quality Points Earned</th>
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</table>

* Please use the back of this form or attach sheet if more room is needed to calculate gpa:

Athletic Director Signature __________________________________________________________

Registrar signature ________________________________________________________________

(Must have college seal)

Deadline February 15th for Fall Sports and June 15th for Spring Sports

ACADEMIC ALL-STATE /DISTINGUISHED ACADEMIC ALL-STATE
NOMINATION FORM

The following student-athlete is nominated for:

Academic All-State _________
(3.25 to 3.79 gpa)

Distinguished Academic All-State _________
(3.8 or higher gpa)

SPORT_____________________________            Date __________________________

NOMINEE'S NAME___________________________________________         Male/Female

HOME ADDRESS (city, state) _________________________________________

MAJOR ___________________________________________________________

COLLEGE _________________________________________________________

CITY____________________________STATE___________

NUMBER OF TERMS COMPLETED___________Semesters

HOURS COMPLETED_________

CUMULATIVE GPA_____________Based on 4.0

I confirm that the above information is correct and agree that it may be released to the media.

Student signature _______________________________________

ATHLETIC DIRECTOR
SIGNATURE_______________________________________________________

REGISTRAR SIGNATURE_______________________________________________________

DUE TO MACJC OFFICE BY JUNE 15

Nominations will not be accepted until the completion of spring term.

Must have College Seal