



Illinois Wrestling Coaches and Officials Association Dear Coach or Administrator:
Each year the IWCOA honors those wrestlers who have excelled in the classroom by establishing the **IWCOA All-Academic Wrestling Team**. Honorees shall receive a certificate acknowledging their accomplishments. Additionally, each recipient will be recognized in the IWCOA All-State Banquet Program. The IWCOA asks for your assistance in identifying these individuals at your school.

Criteria for this award are as follows:

- The recipient must be a high school senior
- The recipient must have earned a Varsity Letter
- The recipient must have a cumulative grade point average (GPA) of 3.7 on a 4.0 scale OR a 4.6 on a 5.0 scale at the end of their 7th semester of high school.
- The recipient's GPA must be verified by the school's Principal or Guidance Counselor
- The recipient does not have to have qualified for the IHSA State Wrestling Tournament to be eligible.

Please assist the IWCOA in identifying these deserving students by completing the enclosed form and returning it to Joe Cliffe (address below) on or before Monday, April 19, 2010. All selectees are invited to the 2010 All-State Banquet on Sunday, April 25, 2010. Additional All-State Banquet information may be secured through Joe Cliffe's Office at 815-657-7032. Individual honorees will have their certificate mailed to their school.

Sincerely,

Bob Baker

IWCOA: Illinois Wrestling Coaches and Officials Association

ACADEMIC ALL-STATE WRESTLING TEAM NOMINATION FORM

Criteria

- The recipient must be a high school senior
- The recipient must have earned a Varsity Letter
- The recipient must have a cumulative grade point average (GPA) of 3.7 on a 4.0 scale OR a 4.6 on a 5.0 scale at the end of their 7th semester of high school.
- The recipient's GPA must be verified by the school's Principal of Guidance Counselor
- The recipient does not have to have qualified for the IHSA State Wrestling Tournament to be eligible.

Wrestler's Name _____

School _____

School Address _____

I certify that the above named individual has met all of the All-State Wrestling Team criteria.

Coach's Signature _____

Principal/Guidance Counselor Signature _____

Forms are due by

MONDAY, April 19, 2010

*Return to: Joe Cliffe
Prairie Central High School
411 North 7th Street
Fairbury, IL 61739
Fax: (815) 692-2438*