



NATIONAL FOOTBALL  
FOUNDATION

# Jack Grinold Eastern Massachusetts Chapter

## SCHOLAR-ATHLETE AWARD NOMINATION

**Date** \_\_\_\_\_

Candidate \_\_\_\_\_ High School \_\_\_\_\_

Address: \_\_\_\_\_

Parents' Names: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Colleges Applied To (circle if accepted): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### Academic Information:

Rank in Class: \_\_\_\_\_ Number in Class: \_\_\_\_\_ Grade Point Average: \_\_\_\_\_

SAT Scores: \_\_\_\_\_

Section Scores: R&W Math Test Scores: Reading Writing Math Essay Scores Reading Analysis Writing

SAT Subject Scores: \_\_\_\_\_

ACT Scores: English: \_\_\_\_\_ Math: \_\_\_\_\_ Science: \_\_\_\_\_ Writing: \_\_\_\_\_ ELA: \_\_\_\_\_ STEM: \_\_\_\_\_ Composite: \_\_\_\_\_

Recommendation of guidance counselor (**Please attach a copy of the school counselor's recommendation and a transcript of his grades and College Board/ACT Scores**).

Football Information: Height \_\_\_\_\_ Weight \_\_\_\_\_ Position: Off: \_\_\_\_\_ Def: \_\_\_\_\_

Years as a starter \_\_\_\_\_ Did he make the All-league team as a junior? \_\_\_\_\_ As a senior? \_\_\_\_\_

Which league? \_\_\_\_\_ Which division? \_\_\_\_\_

Did he make:

The Boston Globe All-Scholastic Team? \_\_\_\_\_ The Boston Herald All-Scholastic Team? \_\_\_\_\_

The Boston Globe All-Division Team? \_\_\_\_\_ The Mass. State Football Coaches Super 26 \_\_\_\_\_ MA All Div \_\_\_\_\_

Has he been selected for the Shrine Game? \_\_\_\_\_ Does he plan to play football in college? \_\_\_\_\_

What is the highest level of football in which he can compete?

Division I BCS \_\_\_\_\_ Division I FCS \_\_\_\_\_ Division II \_\_\_\_\_ Division III \_\_\_\_\_

**ISL NOTE: Our 5<sup>th</sup> year senior policy has changed; you may nominate fifth year players but the maximum of two players selected will still hold true. You may nominate more than two but the maximum of two selected rule will still apply.**

Statement of the coach regarding the FOOTBALL ABILITY and CHARACTER of the candidate:

Extra-Curricular and Outside of School/Community Service Activities: \_\_\_\_\_

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Signatures: \_\_\_\_\_ Principal

\_\_\_\_\_ Guidance Counselor

\_\_\_\_\_ Football Coach

Please return QUESTIONNAIRE, TRANSCRIPT, and SCHOOL COUNSELOR RECOMMENDATIONS by January 15th to:

**Bob Bancroft**

**201 Cedar Drive**

**Lakeville, MA 02347**

**508-269-1024 [pembbob@verizon.net](mailto:pembbob@verizon.net)**

**Send as PDF (f 2 nominees, please send as two distinct PDF's or through mail whichever is easier.**