



2008-2009 NATIONAL INTERSCHOLASTIC SWIMMING COACHES ASSOCIATION OF AMERICA, INC.

ACADEMIC ALL-AMERICA APPLICATION

(Please See Reverse Side for Instructions and Rules Before Completing This Application.)



COACHES ONLY If Yes: Attach a photocopy of your membership card (1 copy per mailing).
NISCA Member Membership card must read 2008-2009 to be valid.
Yes No If No: Include a **\$20.00 non-member** fee for each application. (Payable to NISCA)
 # _____ If you want verification - include a *stamped* legal size (4 1/8 x 9 1/2) pull and seal preferred, self-addressed envelope.
 If you are interested in NISCA membership information, log on to www.niscaonline.org

Postmark _____
 Fee Application _____ Late
 Ck# _____ CC
 Correspondence _____
www.niscaonline.org

- Incomplete applications will be returned and late fees will apply if they do not meet the April 1 deadline. This includes any request made by NISCA to complete your application.
- Choose **option 1 or 2** on the back of this application. For Option 2 NO calculation is necessary. **Grade scale is required with both options.**
- To qualify for this award, you must: (A) have a minimum GPA of 3.750 on a 4 point scale, or 93.7500% of the grade scale your school uses for 7 semesters/11 trimesters. GPA may not be rounded up. (Your school's grade scale is determined by the point value awarded a regular, non-weighted "A"; examples are listed on the back); (B) be a graduating senior; (C) have lettered in your high school program (swimming, diving, or water polo) your senior year. GPA may be weighted or unweighted.**
- A copy of your transcript is required. All work to determine the Option 1 GPA MUST be shown on the transcript. For Option 2 you MUST highlight the cumulative GPA on the transcript. Please follow all directions on the reverse side of this form.
- Staple your transcript (please, no sealed envelopes) and application together.
- Include a self-addressed stamped legal sized (4 1/8 x 9 1/2) envelope, pull and seal preferred, with your application. Verification of acceptance or the need for information will follow. Your certificate is not mailed in this envelope.
- Signature on **Express Mail must be waived.**
- Make a copy of your application for your records and for use if your application is lost in the delivery process.

Application with adequate postage must be mailed to:

Jeff Thompson, IHSSCA Academic Chair
 926 E. Monticello Drive
 Terre Haute, IN 47802
 Phone: (812) 299-1029 (between 7-9 pm)
 Email: jat@vigoschools.org

GRADE POINT AVERAGE

- Option 1: Computed as per the instructions on the back of this form.
- Option 2: As shown and highlighted on the official school transcript.

--	--	--	--	--	--	--	--

- Weighted
- Unweighted

The minimum GPA necessary for consideration is 3.750 on a 4 point scale, or 93.7500% of the grade scale your school uses, which is cumulative from the first semester/trimester of the freshman year through the first semester/second trimester of the senior year.

Applicant must earn a varsity letter in their senior year in swimming/diving/water polo. Only one application per applicant will be accepted.

Postmark Deadline is: March 15

In order to be considered for the IHSSCA Academic All-State team applications must be postmarked by this date. IHSSCA will forward applications to NISCA for consideration for the NISCA Academic All-American team. **No late registrations will be considered by IHSSCA.** For late registration contact NISCA directly: www.niscaonline.org

- MALE FEMALE INDEPENDENT SCHOOL PUBLIC SCHOOL

Check in the appropriate box all sports that apply as part of this application.

- SWIMMING DIVING WATER POLO

NAME OF APPLICANT	FIRST	LAST	
ADDRESS OF APPLICANT	APPLICANT ADDRESS		
	CITY	STATE	ZIP
APPLICANT'S PHONE #	AREA	ATHLETE'S PHONE NUMBER	APPLICANT'S E-MAIL ADDRESS:
NAME OF COACH	This is the 1st form of communication, PLEASE PRINT CLEARLY		
	LAST	FIRST	
ADDRESS OF COACH	COACH'S ADDRESS		
	CITY	STATE	ZIP
COACH'S PHONE #	AREA	HOME PHONE NUMBER	COACH'S E-MAIL ADDRESS:
SCHOOL	This is the 1st form of communication, PLEASE PRINT CLEARLY		
	NAME OF SCHOOL AS YOU WOULD LIKE IT PRINTED ON THE CERTIFICATE		
ADDRESS OF SCHOOL	STREET ADDRESS		
	CITY	STATE	ZIP
SCHOOL'S PHONE #	AREA	PHONE NUMBER	