

Minnesota Wrestling Coaches Association



All-State Academic Nomination Form

Deadline: **February 1st**

Wrestler's Name _____ High School _____

Parent's Name(s) _____ Class: AAA AA A (circle one)

Complete Address _____ Grade: 11th 12th (circle one)

City & Zip _____ Current Weight Class _____

Best Phone Contact # _____ Projected Weight Class for Sections _____

Coach's Name _____ Coach's Phone Number _____

Coach's email address _____



Cumulative High School GPA (**UNWEIGHTED**; minimum of 3.0 and as recent as the last grading period) _____

Career Varsity Win/Loss Record (as of 1/21) _____ Total Matches _____ Winning % _____

State Individual Tournament Participation (# of times) _____

State Tournament Placement(s) _____

We the undersigned, verify that the given information is correct. **Nominations will not be accepted from Head Coaches that are not active in the MWCA.** The Head Wrestling Coach's signature also certifies that they **are an active member** of the MWCA.

Head Wrestling Coach _____

Counselor or Principal _____

System Used:

GPA (x2) Example: 3.25 x 2 = 650 points	Career Varsity Matches – 1 point/match	
Career Varsity Winning % - 85% = 85 points	State Individual Tournament Participation – 25 points/year	
State Tournament Placement(s): 1 st = 50 points	2 nd = 40 points	3 rd = 35 points
4 th = 25 points	5 th = 20 points	6 th = 10 points

**** Plaques will be given to the top two wrestlers in each weight class and a letter will be sent to the recipients congratulating them prior to the State Tournament. Plaques will be available for pick-up by coaches at the State Tournament (pick-up location will be announced by the MWCA).**



Send to: Joe Puncochar Fax: 320-543-4632
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