

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## ALL-STATE PLAYER NOMINEE 2019 OSSCA FORM 1

*(This form has been modified to obtain all information required by the NSCAA. Please type or print all information. Failure to complete the entire nomination form risks DISQUALIFICATION from All-Ohio consideration)*

### PLAYER INFORMATION:

Name: \_\_\_\_\_ Gender: \_\_\_\_\_

Grade Level: \_\_\_\_\_

Position: \_\_\_\_\_ Graduation Month/Year: \_\_\_\_\_

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

City: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### HIGH SCHOOL INFORMATION:

Complete School Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Total High School Enrollment (required) \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### COACHES INFORMATION:

Name \_\_\_\_\_

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

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

Email: \_\_\_\_\_ NSCAA MEMBER #: REQUIRED \_\_\_\_\_

### Athletic Director Information:

Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

PLEASE COMPLETE NEXT PAGE

Varsity Soccer Honors: Check ALL that apply!

OSSCA Form 1 B

All-Conference 1<sup>st</sup> Team:            \_\_\_ Freshman   \_\_\_ Sophomore   \_\_\_ Junior   \_\_\_ Senior  
All-Conference 2<sup>nd</sup> Team:           \_\_\_ Freshman   \_\_\_ Sophomore   \_\_\_ Junior   \_\_\_ Senior  
All-Conference Hon. Mention:     \_\_\_ Freshman   \_\_\_ Sophomore   \_\_\_ Junior   \_\_\_ Senior  
All-District 1<sup>st</sup> Team:            \_\_\_ Freshman   \_\_\_ Sophomore   \_\_\_ Junior   \_\_\_ Senior  
OSSCA All-State 1<sup>st</sup> Team:        \_\_\_ Freshman   \_\_\_ Sophomore   \_\_\_ Junior   \_\_\_ Senior  
OSSCA All-State 2<sup>nd</sup> Team:       \_\_\_ Freshman   \_\_\_ Sophomore   \_\_\_ Junior   \_\_\_ Senior  
NSCAA All-Region Team:          \_\_\_ Freshman   \_\_\_ Sophomore   \_\_\_ Junior   \_\_\_ Senior  
NSCAA All-American:              \_\_\_ Freshman   \_\_\_ Sophomore   \_\_\_ Junior   \_\_\_ Senior

- 
- PROVIDE BRIEF ACCOUNT OF PLAYER'S ACCOMPLISHMENTS for his/her high school team ONLY in the space below.
  - Non scholastic information, including club, ODP, or any college information WILL RESULT IN A 26 point deduction.
  - Participation with US Youth National Team must be accompanied by written verification from US Soccer.
  - Do not include pictures or newspaper clippings.
  - All information above MUST be filled out in order to be eligible for ANY awards.
-

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## ALL-OHIO NOMINATION LIST -- 2019 OSSCA FORM 2

District: \_\_\_\_\_

Division:      1                      2                      3                      BOYS                      GIRLS

List the number of ALL – OHIO nominees the district receives for consideration.

These are our district nominations for All-State in the order that our district coaches selected them and the order in which they are to be presented to the All-State selection committee. The District President’s Signature below testifies that they have personally verified the number of ALL - OHIO selections received and that the number of players listed below matches the number of selections issued by the OSSCA.

	Player’s Name	Pts. received	Player’s School
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____
7	_____	_____	_____
8	_____	_____	_____
9	_____	_____	_____
10	_____	_____	_____
11	_____	_____	_____
12	_____	_____	_____
13	_____	_____	_____
14	_____	_____	_____
15	_____	_____	_____

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Include the exact number of nominees that your district has for this division. **DO NOT INCLUDE AN ALTERNATE.** It is not necessary to bring down 12 names and 12 forms if your district is not getting that many nominees. You must have a form for each name placed on this nomination list, even if that player is an automatic third team selection.



**Involvement in Local/State/NSCAA Organizations:**

**OSSCA Form 3B**

**Local:** \_\_\_\_\_

**State:** \_\_\_\_\_

**National/NSCAA:** \_\_\_\_\_

**ODP/Club/Outside Soccer:** \_\_\_\_\_

- 
- Provide a brief account of the coach's HIGH SCHOOL accomplishments only.
  - Non High School information other than what is requested above will disqualify the nominee.
  - Do not include pictures or newspaper clippings.
-

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## RON PINSENSCHAUM NOMINEE -- 2019

OSSCA FORM 4

Please Note: This award is for coaches of Boys teams only. The Kim Mahoney Award is for Coaches of Girls teams only.

(PLEASE PRINT OR TYPE ALL INFORMATION ON THE FRONT SIDE ONLY)

Coach's Name: \_\_\_\_\_

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

City, Zip: \_\_\_\_\_

School: \_\_\_\_\_ OSSCA District: \_\_\_\_\_

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BRIEF ACCOUNT OF COACH'S HIGH SCHOOL ACCOMPLISHMENTS INCLUDING TEAM, LEAGUE AND LOCAL NEWSPAPER AWARDS. ACCOUNT SHOULD ADDRESS COACH'S PHILOSOPHIES, ATTITUDES, CHARACTER, ETC.

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# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## REFEREE OF THE YEAR NOMINEE -- 2019

OSSCA FORM "R"

Please Note: This award is for Referees only, boys AND girls games.

(PLEASE PRINT OR TYPE ALL INFORMATION ON THE FRONT SIDE ONLY)

Referee's Name: \_\_\_\_\_

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

City, Zip: \_\_\_\_\_

School: \_\_\_\_\_ OSSCA District: \_\_\_\_\_

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BRIEF ACCOUNT OF REFEREE'S ACCOMPLISHMENTS IN HIGH SCHOOL SOCCER INCLUDING, LEAGUE AND LOCAL RECOGNITIONS. ACCOUNT SHOULD ADDRESS REFEREE'S PHILOSOPHIES, ATTITUDES, CHARACTER, ETHICS ETC.

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# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## KIM MAHONEY NOMINEE – 2019 OSSCA FORM 5

Please Note: This award is for coaches of Girls teams only. The Ron Pinsenschaum Award is for Coaches of Boys teams only.

(PLEASE PRINT OR TYPE ALL INFORMATION ON THE FRONT SIDE ONLY)

Coach's Name: \_\_\_\_\_

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

City, Zip: \_\_\_\_\_

School: \_\_\_\_\_ OSSCA District: \_\_\_\_\_

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BRIEF ACCOUNT OF COACH'S HIGH SCHOOL ACCOMPLISHMENTS INCLUDING TEAM, LEAGUE AND LOCAL NEWSPAPER AWARDS. ACCOUNT SHOULD ADDRESS COACH'S PHILOSOPHIES, ATTITUDES, CHARACTER, ETC.

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# OHSAA SPORTSMANSHIP, ETHICS, & INTEGRITY AWARD

## For Coaches of Boys Teams -- 2019

OSSCA FORM 6

(PLEASE PRINT OR TYPE ALL INFORMATION ON THE FRONT SIDE ONLY)

Coach's Name: \_\_\_\_\_

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

City, Zip: \_\_\_\_\_

School: \_\_\_\_\_ OSSCA District: \_\_\_\_\_

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This award is presented to one coach per year. This coach exhibits a high degree of Ethics, Sportsmanship, and Integrity.

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# OHSAA SPORTSMANSHIP, ETHICS, & INTEGRITY AWARD

## For Coaches of Girls Teams -- 2019

OSSCA FORM 7

(PLEASE PRINT OR TYPE ALL INFORMATION ON THE FRONT SIDE ONLY)

Coach's Name: \_\_\_\_\_

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

City, Zip: \_\_\_\_\_

School: \_\_\_\_\_ OSSCA District: \_\_\_\_\_

---

This award is presented to one coach per year. This coach exhibits a high degree of Ethics, Sportsmanship, and Integrity.

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# OHSAA SCHOLASTIC SOCCER COACHES ASSOCIATION

## ASST. COACH OF THE YEAR NOMINEE -- 2019

OSSCA FORM 8

(PLEASE TYPE OR PRINT ALL INFORMATION ON THE FRONT SIDE ONLY)

Circle all that apply:      Girls      Boys      Div 1      Div 2      Div 3

School: \_\_\_\_\_

Coach's Name: \_\_\_\_\_

Coach's Address: \_\_\_\_\_

City and Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ 2019 Record: \_\_\_\_\_

Career Record: \_\_\_\_\_ NSCAA #: \_\_\_\_\_

Coaching Licenses: \_\_\_\_\_

2019 Coaching Awards: \_\_\_\_\_

Previous Coaching Awards: \_\_\_\_\_

2019 Team Accomplishments: \_\_\_\_\_

Recent Team Accomplishments: \_\_\_\_\_

- 
- PROVIDE BRIEF ACCOUNT OF COACH'S HIGH SCHOOL ACCOMPLISHMENTS ONLY.
  - NON HIGH SCHOOL INFORMATION WILL RESULT IN AUTOMATIC DISQUALIFICATION FROM CONSIDERATION.
  - DO NOT INCLUDE PICTURES OR NEWSPAPER CLIPPINGS.
  - ALL INFORMATION ABOVE MUST BE FILLED OUT IN ORDER TO BE ELIGIBLE FOR ANY AWARDS.
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# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## HALL OF FAME VOTING PROCEDURES

OSSCA FORM 9

### **STATEMENT:**

The Hall of Fame selection committee shall consist of a chairperson and the members of the OSSCA Board of Directors. The responsibility of the committee members will be to elect candidates who are nominated by letters of recommendation from three persons who are members of the OSSCA. Letters of nomination are to be sent to the committee chairperson no later than thirty days prior to the committee meeting. The committee shall meet and act on all nominees as to allow announcement of the new Hall of Fame selections at the annual spring coaches' clinic. The chairperson shall appoint an assistant and secretary from among the committee members.

### **Selection Criteria:**

1. Letters of recommendation from three OSSCA members.
2. Fifteen years of service to scholastic soccer in Ohio after the completion of high school eligibility.

### **Selection Guidelines:** (examples)

1. Coached an Ohio state championship team.
2. Coached a number of All-Ohio players.
3. National Hall of Fame member.
4. Coach of the Year.
5. Officer in the OSSCA.
6. Officiated in Ohio state finals.

### **Selection Categories:** (May be combined to reach 15 years service)

1. Coach
2. Player
3. Official
4. Contributor to Ohio Scholastic soccer

### **Hall of Fame Committee Voting Procedure:**

3. Names of all nominees will be presented to the committee for review and vote. A nominee must gain at least 60% of the total points available. Voting points are based on the number of eligible nominees times the numbers of selection committee members.

Example: If there are 6 nominees and 12 voting committee members, the maximum number of points one individual can receive is 72 points. (6 first place votes times 12 voters). In order to reach induction a successful candidate must receive 60% of 72 points, which would be 44 points.

Ballots will be cast listing nominees in priority order, i.e. the first listed nominee receives the

highest vote total and the last nominee listed will receive one point.

Example: If there are six nominees, the nominee listed first receives 6 points, the second listed receives 5 points and on down to the sixth nominee, who receives 1 point.

Selection committee members are not required to vote for all nominees on their ballots. Any first time nominee not selected will automatically be reconsidered the following year. Any nominee failing to gain membership in the Hall of Fame for two consecutive years must be renominated using the same procedure as above to be considered for membership. Upon completion of the voting process, the Hall of Fame Committee Chairperson will present the names of the new inductees to the OSSCA Executive Board.

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION HALL OF FAME NOMINEE - COACH

OSSCA FORM 10

Year Nominated \_\_\_\_\_ Year Inducted \_\_\_\_\_ Pts. received 1<sup>st</sup> year \_\_\_\_\_

Pts. received 2<sup>nd</sup> year \_\_\_\_\_

Coach's Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

City & Zip: \_\_\_\_\_

School: \_\_\_\_\_

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

City & Zip \_\_\_\_\_

How long has the nominee been a member of the OSSCA ? \_\_\_\_\_

Total Years of coaching \_\_\_\_\_ Head Coach \_\_\_\_\_ JV \_\_\_\_\_ Jr. High \_\_\_\_\_

Lifetime Won-Loss Record as a Head Coach W \_\_\_\_\_ L \_\_\_\_\_ T \_\_\_\_\_

Record in Ohio W \_\_\_\_\_ L \_\_\_\_\_ T \_\_\_\_\_

Lifetime Varsity Won-Loss Record W \_\_\_\_\_ L \_\_\_\_\_ T \_\_\_\_\_

Schools they have coached at Years as coach Schools they have coached at Years as coach

\_\_\_\_\_

\_\_\_\_\_

Soccer Honors, Past and Present

Contributions to the **OSSCA**

Contributions to their local association/area.

Please complete the back side of this form.

For other comments or if additional space is needed see the back of this sheet.

# HALL OF FAME NOMINEE - COACH

OSSCA FORM 10a

Name of Hall of Fame nominee \_\_\_\_\_

Family Size and Names  
and ages. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Birthplace \_\_\_\_\_

College(s) Attended \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

College Honors \_\_\_\_\_

\_\_\_\_\_

High School Attended \_\_\_\_\_

High School Honors \_\_\_\_\_

Name & Address of Local Paper \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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If more space is needed from the front of the sheet, use the area below.

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION HALL OF FAME NOMINEE - PLAYER

OSSCA FORM 11

Year Nominated \_\_\_\_\_ Year Inducted \_\_\_\_\_ Pts. received 1<sup>st</sup> year \_\_\_\_\_

Pts. received 2<sup>nd</sup> year \_\_\_\_\_

Player's Name: \_\_\_\_\_

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

City, Zip: \_\_\_\_\_

Phone : \_\_\_\_\_

High School: \_\_\_\_\_

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

City, Zip: \_\_\_\_\_

PLEASE NOTE: The OSSCA Hall of Fame nominees for a player are not based on their HS accomplishments alone. They will have had to have success in either the professional level or the National Team Senior level, such as Brad Friedel. OSSCA bylaws state that any player capped on the senior teams are automatically nominated to the OSSCA Hall of Fame.

Play beyond high school:	Team	Years
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Honors, Past and Present

Contributions to the OSSCA or local association/area (not a requirement for player nominees)

Other comments

Please complete the back side of this form.  
For other comments or if additional space is needed see the back of this sheet.

# HALL OF FAME NOMINEE - PLAYER

OSSCA FORM 11a

Name of Hall of Fame nominee \_\_\_\_\_

Family Size and Names  
and ages. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Birthplace \_\_\_\_\_

College(s) Attended \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

College Honors \_\_\_\_\_

\_\_\_\_\_

High School Attended \_\_\_\_\_

High School Honors \_\_\_\_\_

Name & Address of Local Paper \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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If more space is needed from the front of the sheet, use the area below.

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION HALL OF FAME NOMINEE – CONTRIBUTOR OSSCA FORM 12

Year Nominated \_\_\_\_\_ Year Inducted \_\_\_\_\_ Pts. received 1<sup>st</sup> year \_\_\_\_\_

Pts. received 2<sup>nd</sup> year \_\_\_\_\_

Contributor's Name: \_\_\_\_\_

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

City, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

OSSCA MEMBER: YES NO YEARS \_\_\_\_\_

Contributions to the game of soccer in Ohio:

Contributions to the OSSCA or local association/area

Other comments

Please complete the back side of this form.  
For other comments or if additional space is needed see the back of this sheet.

# HALL OF FAME NOMINEE - CONTRIBUTOR

OSSCA FORM 12a

Name of Hall of Fame nominee \_\_\_\_\_

Family Size and Names  
and ages. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Birthplace \_\_\_\_\_

College(s) Attended \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

College Honors \_\_\_\_\_

\_\_\_\_\_

High School Attended \_\_\_\_\_

High School Honors \_\_\_\_\_

Name & Address of Local Paper \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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If more space is needed from the front of the sheet, use the area below.

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION HALL OF FAME NOMINEE - OFFICIAL

OSSCA FORM 13

Year Nominated \_\_\_\_\_ Year Inducted \_\_\_\_\_ Pts. received 1<sup>st</sup> year \_\_\_\_\_

Pts. received 2<sup>nd</sup> year \_\_\_\_\_

Official's Name: \_\_\_\_\_

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

City, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Years as an official \_\_\_\_\_

OSSCA MEMBER \_\_\_\_\_

YEARS \_\_\_\_\_

Honors, Past and Present

State Championship or semi-final games that they refereed:

Contributions to the OSSCA or local association/area

Other comments

Please complete the back side of this form.

For other comments or if additional space is needed see the back of this sheet.

# HALL OF FAME NOMINEE - OFFICIAL

OSSCA FORM 13a

Name of Hall of Fame nominee \_\_\_\_\_

Family Size and Names  
and ages. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Birthplace \_\_\_\_\_

College(s) Attended \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

College Honors \_\_\_\_\_

\_\_\_\_\_

High School Attended \_\_\_\_\_

High School Honors \_\_\_\_\_

Name & address of local paper \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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If more space is needed from the front of the sheet, use the area below.

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION COACHING VICTORIES -- 2019

OSSCA FORM 14

- Recognition is awarded for 100,150,200,250, 300, 350 etc. Varsity high school wins only.
- All wins must be as a Varsity Head Coach. Wins do not have to be at the same school.
- Tournament games are included. Preseason games do not count.
- Please complete the following list for any coaches that qualify.
- Use additional forms if needed.

DISTRICT: \_\_\_\_\_

Signature of District President for Verification: \_\_\_\_\_

	NAME	SCHOOL	RECORD	YEARS
1	_____	_____	_____	_____
	Address	_____	_____	_____
2	_____	_____	_____	_____
	Address	_____	_____	_____
3	_____	_____	_____	_____
	Address	_____	_____	_____
4	_____	_____	_____	_____
	Address	_____	_____	_____
5	_____	_____	_____	_____
	Address	_____	_____	_____
6	_____	_____	_____	_____
	Address	_____	_____	_____
7	_____	_____	_____	_____
	Address	_____	_____	_____
8	_____	_____	_____	_____
	Address	_____	_____	_____
9	_____	_____	_____	_____
	Address	_____	_____	_____

COMPLETE FORM DUETO THE OSSCA VP-HONORS AT ALL STATE VOTING.

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## OSSCA TEAM ACADEMIC AWARD -- 2019 OSSCA FORM 15

NAME OF SCHOOL \_\_\_\_\_ BOYS \_\_\_\_\_ GIRLS \_\_\_\_\_  
 SCHOOL ADDRESS \_\_\_\_\_  
 CITY & ZIP \_\_\_\_\_  
 NAME OF COACH - please print \_\_\_\_\_ OSSCA DISTRICT \_\_\_\_\_

ALL OF THE CONTACT INFORMATION NEEDS TO BE COMPLETED IN ITS ENTIRETY. FAILURE TO COMPLETE THE CONTACT INFORMATION COMPLETELY WILL RESULT IN THE FORM BEING VOIDED. ONCE A TEAM SUBMITS A VOIDED FORM, THE TEAM LOSES THE OPPORTUNITY TO WIN THAT AWARD FOR THAT YEAR. TEAMS THAT SUBMIT A VOIDED FORM WILL NOT BE NOTIFIED.

	<u>TEAM MEMBERS</u>	<u>GRADE</u>	<u>GPA</u>
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____
7	_____	_____	_____
8	_____	_____	_____
9	_____	_____	_____
10	_____	_____	_____
11	_____	_____	_____
12	_____	_____	_____
13	_____	_____	_____
14	_____	_____	_____
15	_____	_____	_____
16	_____	_____	_____
17	_____	_____	_____
18	_____	_____	_____

IF MORE PLAYERS RECEIVED A VARSITY LETTER USE THE REVERSE SIDE

TEAM AVERAGE GPA \_\_\_\_\_

- Remember that you **MUST** attach a copy of your team's game day roster.
- The OHSAA eligibility form **DOES NOT** count as a team roster.
- The players on the game day roster need to exactly match the names on this form.
- Failure of the names to match up will result in the form being automatically voided.

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## TEAM ACADEMIC AWARD -- 2019 OSSCA FORM 15a

### OSSCA TEAM ACADEMIC AWARD CRITERIA AND DIRECTIONS

The OSSCA sponsors a team academic award that is open to all teams that field a varsity level soccer team. There is no limit to the number of teams that can win the award.

The requirements for the award are as follows:

- 1 The team needs to complete and submit the OSSCA TEAM SCHOLARSHIP FORM at the All State voting meeting in late October/early November.
  
- 2 The form will include the following information:
  - TEAM NAME
  - GENDER OF TEAM
  - **COMPLETE ADDRESS OF SCHOOL INCLUDING CITY AND ZIP CODE**
  - PRINTED NAME OF COACH
  - OSSCA DISTRICT

A COMPLETE LIST OF ALL VARSITY LETTER WINNERS ALONG WITH THEIR GPA AS CALCULATED AT THEN END OF THE SECOND SEMESTER OF THE CURRENT YEAR. THIS MIRRORS THE NSCAA AWARD, RECOGNIZING THE TEAM FROM THE PREVIOUS SEASON.

ALL GPA's MUST BE CALCULATED TO TWO (2) DECIMAL PLACES.

THE TEAM AVERAGE GPA MUST BE AT LEAST A **3.00 ON A 4.00 SCALE** ON EITHER A WEIGHTED OR AN UNWEIGHTED SCALE. GRADES ARE NOT TO BE ROUNDED.

NINTH GRADERS ON A VARSITY TEAM THAT ARE ATTENDING THE SCHOOL FOR THE FIRST TIME DO COUNT TOWARDS THE TEAM GPA.  
PLAYERS WHO HAVE TRANSFERED FROM ANOTHER SCHOOL AND ARE NOT FRESHMAN SHOULD HAVE THEIR GPA INCLUDED IN THE CALCULATIONS.

AS WITH ALL OSSCA AWARDS THE DISTRICT PRESIDENT NEEDS TO SIGN THE FORM BEFORE IT IS SUBMITTED TO THE OSSCA.

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Use the space below to add any players not listed on the front side of this form.

19	_____	_____	_____
20	_____	_____	_____
21	_____	_____	_____
22	_____	_____	_____

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## REFEREE AWARD -- 2019

OSSCA FORM 21

**THIS FORM IS FOR INTERNAL USE ONLY BY DISTRICT PRESIDENTS**

The referees that are listed below are certified by the OSSCA District President to be that district's nominees for the OSSCA referee award. There are to be no more than two nominees per district. The recipients do not need to be ranked.

DISTRICT: \_\_\_\_\_

REFEREE AWARD: You must include the complete mailing address of the referee to nominate them for the REFEREE AWARD.

Name of referee \_\_\_\_\_

Address \_\_\_\_\_

City, state, zip \_\_\_\_\_

Name of referee \_\_\_\_\_

Address \_\_\_\_\_

City, state, zip \_\_\_\_\_

Signature of District President \_\_\_\_\_

District Presidents need only bring 1 copy of this form to the All-Ohio voting meeting.

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## Referee of the Year Award – OSSCA Form R

THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD

### BALLOT

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

4 \_\_\_\_\_

5 \_\_\_\_\_

6 \_\_\_\_\_

7 \_\_\_\_\_

8 \_\_\_\_\_

9 \_\_\_\_\_

10 \_\_\_\_\_

11 \_\_\_\_\_

12 \_\_\_\_\_

13 \_\_\_\_\_

14 \_\_\_\_\_

15 \_\_\_\_\_

Vote for as many of the nominees as you wish IN ORDER of preference. The vote will be weighted as with players in All Ohio voting.

The Referee receiving the most total points will be named OSCA Referee of the Year for this season.

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION TEAM SPORTSMANSHIP AWARD -- 2019

OSSCA FORM 22

**THIS FORM IS FOR INTERNAL USE ONLY BY DISTRICT PRESIDENTS**

The teams that are listed below are certified by the OSSCA District President to be that district's nominees for the OSSCA team sportsmanship award. There is to be one and only one team per division per gender. If a team is not nominated in one division a district may not substitute a team from another division or gender.

DISTRICT: \_\_\_\_\_

## **GIRLS TEAM SPORTSMANSHIP AWARD**

SCHOOL

COACH

DIVISION 1 \_\_\_\_\_

\_\_\_\_\_

School address with zip code: \_\_\_\_\_

DIVISION 2 \_\_\_\_\_

\_\_\_\_\_

School address with zip code: \_\_\_\_\_

## **BOYS TEAM SPORTSMANSHIP AWARD**

SCHOOL

COACH

DIVISION 1 \_\_\_\_\_

\_\_\_\_\_

School address with zip code: \_\_\_\_\_

DIVISION 2 \_\_\_\_\_

\_\_\_\_\_

School address with zip code: \_\_\_\_\_

DIVISION 3 \_\_\_\_\_

\_\_\_\_\_

School address with zip code: \_\_\_\_\_

**Signature of District President** \_\_\_\_\_

District Presidents need only bring 1 copy of this form to the All-Ohio voting meeting.

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION CHECKLIST FOR FORMS TO BRING TO THE OSSCA ALL-OHIO VOTING MEETING.

OSSCA FORM 23

THIS FORM IS FOR INTERNAL USE ONLY BY THE DISTRICT PRESIDENTS

	Player Packets (20 each)	Public School COY (20 each)	Asst. COY (20 each)
Boys Division 1	_____	_____	_____
Boys Division 2	_____	_____	_____
Boys Division 3	_____	_____	_____
Girls Division 1	_____	_____	_____
Girls Division 2	_____	_____	_____
Ron Pinsenschaum Nominee		_____	
Kim Mahoney Award		_____	
OHSAA SEI Award (Boys)		_____	
OHSAA SEI Award (Girls)		_____	
Boys P/P COY Nominee		_____	
Girls P/P COY Nominee		_____	
Number of Individual Academic Award winners		_____	
Packet of Team Academic Award Forms		_____	
Referee Award Winners		_____	
Team Sportsmanship Winners		_____	
Hall of Fame nominees	_____		

# OSSCA - ALL STATE PLAYER BALLOT

OSSCA FORM 26

THIS FORM IS FOR INTERNAL USE ONLY BY ALL-OHIO VOTERS

Circle all that apply: BOYS/GIRLS FIRST TEAM      DIVISION   1   2   3

VOTER: \_\_\_\_\_ DISTRICT \_\_\_\_\_

ON THE LINE BELOW VOTE FOR TWENTY-FIVE (25) PLAYERS IN ORDER OF PREFERENCE. **FILL OUT THE BALLOT COMPLETELY AND DO NOT ENTER A NAME TWICE.** BE SURE TO ENTER ALL INFORMATION.

	NAME	GRADE	SCHOOL
1. (26 PTS.)	_____	_____	_____
2. (24 PTS.)	_____	_____	_____
3. (23 PTS.)	_____	_____	_____
4. (22 PTS.)	_____	_____	_____
5. (21 PTS.)	_____	_____	_____
6. (20 PTS.)	_____	_____	_____
7. (19 PTS.)	_____	_____	_____
8. (18 PTS.)	_____	_____	_____
9. (17 PTS.)	_____	_____	_____
10. (16 PTS.)	_____	_____	_____
11. (15 PTS.)	_____	_____	_____
12. (14 PTS.)	_____	_____	_____
13. (13 PTS.)	_____	_____	_____
14. (12 PTS.)	_____	_____	_____
15. (11 PTS.)	_____	_____	_____
16. (10 PTS.)	_____	_____	_____
17. (9 PTS.)	_____	_____	_____
18. (8 PTS.)	_____	_____	_____
19. (7 PTS.)	_____	_____	_____
20. (6 PTS.)	_____	_____	_____
21. (5 PTS.)	_____	_____	_____
22. (4 PTS.)	_____	_____	_____
23. (3 PTS.)	_____	_____	_____
24. (2 PTS.)	_____	_____	_____
25. (1 PT)	_____	_____	_____

**OSSCA - ALL OHIO TEAMS - FIRST TEAM -- 2019**

OSSCA FORM 27a

FOR INTERNAL USE ONLY BY ALL-OHIO DIVISIONAL CHAIR Circle all that apply: Girls Boys Div 1 2 3  
Please print neatly so we can eliminate typos and misspellings when the teams are released.

	NAME	SCHOOL	GRADE	POS.
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____
5	_____	_____	_____	_____
6	_____	_____	_____	_____
7	_____	_____	_____	_____
8	_____	_____	_____	_____
9	_____	_____	_____	_____
10	_____	_____	_____	_____
11	_____	_____	_____	_____
12	_____	_____	_____	_____
13	_____	_____	_____	_____
14	_____	_____	_____	_____
15	_____	_____	_____	_____
16	_____	_____	_____	_____
17	_____	_____	_____	_____
18	_____	_____	_____	_____

**OSSCA - ALL OHIO TEAMS - SECOND TEAM -- 2017** *OSSCA FORM 27b*

FOR INTERNAL USE ONLY BY ALL-OHIO DIVISIONAL CHAIR Circle all that apply: Girls Boys Div 1 2 3  
Please print neatly so we can eliminate typos and misspellings when the teams are released.

	NAME	SCHOOL	GRADE	POS.
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____
5	_____	_____	_____	_____
6	_____	_____	_____	_____
7	_____	_____	_____	_____
8	_____	_____	_____	_____
9	_____	_____	_____	_____
10	_____	_____	_____	_____
11	_____	_____	_____	_____
12	_____	_____	_____	_____
13	_____	_____	_____	_____
14	_____	_____	_____	_____
15	_____	_____	_____	_____
16	_____	_____	_____	_____
17	_____	_____	_____	_____
18	_____	_____	_____	_____
19	_____	_____	_____	_____
20	_____	_____	_____	_____
21	_____	_____	_____	_____
22	_____	_____	_____	_____
23	_____	_____	_____	_____
24	_____	_____	_____	_____

25 \_\_\_\_\_

26 \_\_\_\_\_

27 \_\_\_\_\_

28 \_\_\_\_\_

29 \_\_\_\_\_

30 \_\_\_\_\_

31 \_\_\_\_\_

32 \_\_\_\_\_

33 \_\_\_\_\_

34 \_\_\_\_\_

35 \_\_\_\_\_

36 \_\_\_\_\_

37 \_\_\_\_\_

38 \_\_\_\_\_

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## ALL OHIO TEAMS - THIRD TEAM -- 2017 OSSCA FORM 27c

THIS FORM IS FOR INTERNAL USE ONLY BY ALL-OHIO DIVISIONAL CHAIR

Circle all that apply:      Girls      Boys      Div 1      Div 2      Div 3

Please print neatly so we can eliminate typos and misspellings when the teams are released.

	NAME	SCHOOL	GRADE	POS.
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____
5	_____	_____	_____	_____
6	_____	_____	_____	_____
7	_____	_____	_____	_____
8	_____	_____	_____	_____
9	_____	_____	_____	_____
10	_____	_____	_____	_____
11	_____	_____	_____	_____
12	_____	_____	_____	_____
13	_____	_____	_____	_____
14	_____	_____	_____	_____
15	_____	_____	_____	_____
16	_____	_____	_____	_____
17	_____	_____	_____	_____
18	_____	_____	_____	_____

If more than 18 are on the third team, check the line to the left and include the names on the back of the form.

---

PRINTED NAME AND SIGNATURE OF OSSCA DIVISION CHAIR FOR VERIFICATION.

\_\_\_\_\_ DIVISION CHAIR; please initial in the space at the left that your forms are printed in a legible manner and all names have been verified for correct spelling.

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION TIE BREAKER BALLOT

OSSCA FORM 28

THIS FORM IS FOR INTERNAL USE ONLY BY ALL-OHIO VOTERS & EXECUTIVE BOARD

Circle those that apply:

BOYS

GIRLS

FIRST TEAM

SECOND TEAM

DIVISION 1

DIVISION 2

DIVISION 3

COACH OF THE YEAR

PRIVATE/PAROCHIAL COACH OF THE YEAR

ASSISTANT COACH OF THE YEAR

RON PINSENSCHAUM AWARD

KIM MAHONEY AWARD

OHSAA SEI for BOYS

OHSAA SEI for GIRLS

VOTER: \_\_\_\_\_

DISTRICT: \_\_\_\_\_

NAME

SCHOOL

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

Only use as many lines as needed for the vote.

**OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION**  
**COACH OF THE YEAR BALLOT** *OSSCA FORM 29*

THIS FORM IS FOR INTERNAL USE ONLY BY ALL-OHIO VOTERS

CIRCLE THOSE THAT APPLY:

DIVISION 1

DIVISION 2

DIVISION 3

BOYS

GIRLS

VOTER: \_\_\_\_\_

DISTRICT: \_\_\_\_\_

=====

**PUBLIC SCHOOL COACH OF THE YEAR:**

NAME: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

\_\_\_\_\_

**ASSISTANT COACH OF THE YEAR:**

NAME: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

\_\_\_\_\_

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## DIRECTIONS FOR EXECUTIVE BOARD VOTING

OSSCA FORM 31

(The data in bold faced type needs to be edited each year.)

### **THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD**

Dear Voters,

Included in this mailing are several packets. They are the All-American nominees, the Player of the Year nominees, Private/Parochial Coach of the year nominees, the Assistant Coach of the Year nominees and the Coaches Awards nominees.

### ALL-AMERICAN VOTING

This year we get ? All-American selections and ? All-Regional selections for the girls and ? All-American selections and ? All-Regional selections for the boys . The purpose of this ballot is to rank the top players from our earlier All-Ohio selections to choose our All-Americans. I have given you the forms to choose from for the girls and the forms to choose from for the boys. These forms do not include the top vote getters in each division as they will be voted separately for OHIO PLAYER OF THE YEAR. The top vote getter in each division is an automatic All-American selection. You have been given the All-Ohio First Team sheets to assist you in voting.

Please vote for all 11 places on the ballot for both boys and girls. After you are finished you need to email me your votes at ? and then send me the ballots through the US mail. I have included a stamped & addressed envelope for your convenience. I have not included the NSCAA forms on the back of the All-Ohio forms. They aren't needed for the vote.

### FOR PLAYER OF THE YEAR VOTING

You have received All-Ohio forms for the top vote getters.

There are ? nominees for the girls and ? for the boys.

The names of the girl nominees are ?.

The names of the boy nominees are ?.

You are to vote for one of the girl nominees and one of the boy nominees and email me the vote at ? and then send the ballot through US mail the same as the All-American selections.

### FOR ALL COACH OF THE YEAR VOTING.

You will be voting for Private/Parochial Coach of the Year in both boys and girls. You will also be voting for Assistant coaches of the year to be sent to the National committee. (Please note, that if there are no assistant coaches or only one coach who is member of the national, you will not receive forms or a ballot. The selection is either not applicable to us (if no coach is a member) or the selection is automatic (if there is only one nominee)) Please use the enclosed ballot. Follow the selection of the earlier voting in that you need to email me your votes at ????? and then send me the ballot via US mail as described earlier.

#### FOR ALL OTHER COACHES AWARDS NOMINEES

You will be voting for the Ron Pinsenschaum, Kim Mahoney, and the two OHSAA SEI winners. The criteria for each award is listed on the nomination form. Please use the enclosed ballot. Follow the selection of the earlier voting in that you need to email me your votes at ? and then send me the ballot via US mail as described earlier. My address is ?

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION EXECUTIVE BOARD BALLOT

OSSCA FORM 32

THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD

## • PLAYER OF THE YEAR

VOTER: \_\_\_\_\_

DISTRICT: \_\_\_\_\_

### • GIRLS PLAYER OF THE YEAR

Nomination forms are attached to this ballot.

1. (3 pts.) \_\_\_\_\_

2.(2 pts.) \_\_\_\_\_

3.(1 pt) \_\_\_\_\_

### • BOYS PLAYER OF THE YEAR

Nomination forms are attached to this ballot.

1. (3 pts.) \_\_\_\_\_

2. (2 pts.) \_\_\_\_\_

3. (1 pt.) \_\_\_\_\_

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION EXECUTIVE BOARD BALLOT

OSSCA FORM 33

THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD

- **BOYS ASSISTANT COACH OF THE YEAR**
- **GIRLS ASSISTANT COACH OF THE YEAR**

VOTER: \_\_\_\_\_

DISTRICT: \_\_\_\_\_

- **BOYS ASSISTANT COACH OF THE YEAR**

1. (3 pts.) \_\_\_\_\_
2. (2 pts.) \_\_\_\_\_
3. (1 pt.) \_\_\_\_\_

- **GIRLS ASSISTANT COACH OF THE YEAR**

1. (3 pts.) \_\_\_\_\_
2. (2 pts.) \_\_\_\_\_
3. (1 pt.) \_\_\_\_\_

The Assistant Coach of the Year Award is given to the coach who wins the award in each division.

This ballot is to determine who advances to the NSCAA for Regional consideration.

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION EXECUTIVE BOARD BALLOT

OSSCA FORM 34

THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD

- **BOYS PRIVATE/PAROCHIAL COACH OF THE YEAR**
- **GIRLS PRIVATE/PAROCHIAL COACH OF THE YEAR**

VOTER: \_\_\_\_\_

DISTRICT: \_\_\_\_\_

NOMINEE FORMS ARE ATTACHED TO THIS BALLOT.

- **GIRLS PRIVATE/PAROCHIAL COACH OF THE YEAR**

1. (3 pts.) \_\_\_\_\_
2. (2 pts.) \_\_\_\_\_
3. (1 pt.) \_\_\_\_\_

- **BOYS PRIVATE/PAROCHIAL COACH OF THE YEAR**

1. (3 pts.) \_\_\_\_\_
2. (2 pts.) \_\_\_\_\_
3. (1 pt.) \_\_\_\_\_

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION EXECUTIVE BOARD BALLOT

OSSCA FORM 35

THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD

- **NSCAA COACH OF THE YEAR**

VOTER: \_\_\_\_\_

Boys and Girls will have to send 2 of the three PUBLIC SCHOOL coaches of the year to the NSCAA for possible consideration for further honors. This will be done by a weighted vote. The top two vote getters will be advanced to the NSCAA for further consideration for honors. The coach from the school with the larger enrollment will be our Large school nominee. The coach from the school with the smaller enrollment will be our Small School nominee.

### **BOYS PUBLIC SCHOOL COACH OF THE YEAR**

1. (3 pts.) \_\_\_\_\_
2. (2 pts.) \_\_\_\_\_
3. (1 pt.) \_\_\_\_\_

### **GIRLS PUBLIC SCHOOL COACH OF THE YEAR**

1. (3 pts.) \_\_\_\_\_
2. (2 pts.) \_\_\_\_\_
3. (1 pt) \_\_\_\_\_

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION EXECUTIVE BOARD BALLOT

OSSCA FORM 36

THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD

- **COACHES AWARD**

VOTER: \_\_\_\_\_

DISTRICT: \_\_\_\_\_

NOMINEE FORMS ARE ATTACHED TO THIS BALLOT.

- **Ron Pinsenschaum Award**

1. (3 pts.) \_\_\_\_\_

2. (2 pts.) \_\_\_\_\_

3. (1 pt.) \_\_\_\_\_

- **Kim Mahoney Award**

1. (3 pts.) \_\_\_\_\_

2. (2 pts.) \_\_\_\_\_

3. (1 pt.) \_\_\_\_\_

- **OHSAA SEI Award (for coaches of Boys Teams)**

1. (3 pts.) \_\_\_\_\_

2. (2 pts.) \_\_\_\_\_

3. (1 pt.) \_\_\_\_\_

- **OHSAA SEI Award (for coaches of Girls Teams)**

1. (3 pts.) \_\_\_\_\_

2. (2 pts.) \_\_\_\_\_

3. (1 pt.) \_\_\_\_\_

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION OSSCA CHECKLIST OF DISTRICTS

OSSCA FORM 41

THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD

Use this sheet as a checklist when collecting forms, etc. from the districts.

A -- \_\_\_\_\_  
B -- \_\_\_\_\_  
C -- \_\_\_\_\_  
D -- \_\_\_\_\_  
E -- \_\_\_\_\_

	A	B	C	D	E
AKRON	_____	_____	_____	_____	_____
CENTRAL	_____	_____	_____	_____	_____
CLEVELAND	_____	_____	_____	_____	_____
EAST	_____	_____	_____	_____	_____
MIAMI VALLEY	_____	_____	_____	_____	_____
NORTH CENTRAL	_____	_____	_____	_____	_____
NORTHWEST	_____	_____	_____	_____	_____
SOUTHEAST	_____	_____	_____	_____	_____
SOUTHWEST	_____	_____	_____	_____	_____
YOUNGSTOWN	_____	_____	_____	_____	_____

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## NUMBER OF AVAILABLE CERTIFICATES

OSSCA FORM 42

**THIS FORM IS FOR INTERNAL USE ONLY BY THE HONORS VICE-PRESIDENT**

The number of certificates on hand for each award are counted here and compared with the amount that should be on hand.

	<b>Amount on hand</b>	<b>Amount needed</b>
Individual Academic Awards	_____	2,000
Team Academic Awards	_____	2,400
OSSCA ALL-OHIO	_____	500
100 win coaching awards	_____	200
150 win coaching awards	_____	150
200 win coaching awards	_____	100
250 win coaching awards	_____	100
OSSCA Referee awards	_____	500
OSSCA Appreciation Awards	_____	200
OSSCA Team Sportsmanship	_____	500
ALL-OHIO Player Ballots	_____	1,000
ALL-OHIO Tie - Breaker Ballots	_____	500
Team Academic Congratulatory Letters	_____	500
ALL - REGIONAL Congratulatory Letters	_____	250

**DATE COUNTED** \_\_\_\_\_

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## LIST OF OSSCA HONORS FORMS

OSSCA FORM 49a

### DESCRIPTION OF ORGANIZATION OF FORMS

#### **THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD**

- Forms 1 to 20: These forms are for the general membership. All of these forms marked with an asterisk in the table should be put on the website.
- Forms 21 to 25: These forms are for internal use by the District Presidents.
- Forms 26 to 30: These forms are for internal use for the ALL – OHIO voting meeting.
- Forms 31 to 40: These forms are for internal use for the EXECUTIVE BOARD voting for honors.
- Forms 41 to 49: Miscellaneous Internal Use Only Forms, etc.
- Forms 50 to 59: Any forms from the NSCAA.
- Forms 60 and up: Outdated forms for the archives.



# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

## LIST OF OSSCA HONORS FORMS

OSSCA FORM 49c

DESCRIPTION OF ORGANIZATION OF FORMS

**THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD**

Forms 21 to 25: These forms are for internal use by the District Presidents.

21	OSSCA REFEREE AWARD
22	OSSCA TEAM SPORTSMANSHIP AWARD
23	CHECKLIST FOR FORMS FOR OSSCA ALL-OHIO VOTING MEETING

**OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION**

# LIST OF OSSCA HONORS FORMS

OSSCA FORM 49d

DESCRIPTION OF ORGANIZATION OF FORMS

**THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD**

Forms 26 to 30: These forms are for internal use for the ALL – OHIO voting meeting.

26	ALL-STATE PLAYER BALLOT
27a	ALL OHIO FIRST TEAM LIST
27b	ALL OHIO SECOND TEAM LIST
27c	ALL OHIO THIRD TEAM LIST
28	TIE BREAKER BALLOT (ALL BALLOTS)
29	OSSCA COACH OF THE YEAR BALLOT

**OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION  
LIST OF OSSCA HONORS FORMS**

OSSCA FORM 49e

## DESCRIPTION OF ORGANIZATION OF FORMS

### **THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD**

Forms 31 to 40: These forms are for internal use for the EXECUTIVE BOARD voting for honors.

31	DIRECTIONS TO EXEC. BOARD FOR VOTING
32	OSSCA PLAYER OF THE YEAR BALLOT
33	OSSCA ASSISTANT COACH OF THE YEAR BALLOT
34	OSSCA PRIVATE/PAROCHIAL COACH OF THE YEAR BALLOT
35	NSCAA COACH OF THE YEAR NOMINEE BALLOT
36	OSSCA COACHES AWARDS BALLOT

DESCRIPTION OF ORGANIZATION OF FORMS

**THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD**

Forms 41 to 49: Miscellaneous Internal Use Only Forms, etc.

41	OSSCA CHECKLIST OF DISTRICTS
42	NUMBER OF AVAILABLE CERTIFICATES

## DESCRIPTION OF ORGANIZATION OF FORMS

**THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD**

Forms 50 to 59: Any forms from the NSCAA.

50	ALL AMERICAN PLAYER NOMINATION FORM	(NSCAA)
51	COACH OF THE YEAR - SMALL SCHOOL BOYS	(NSCAA)
52	COACH OF THE YEAR - LARGE SCHOOL BOYS	(NSCAA)
53	COACH OF THE YEAR - PRIVATE/PAROCHIAL BOYS	(NSCAA)
54	COACH OF THE YEAR - SMALL SCHOOL GIRLS	(NSCAA)
55	COACH OF THE YEAR - LARGE SCHOOL GIRLS	(NSCAA)
56	COACH OF THE YEAR - PRIVATE/PAROCHIAL GIRLS	(NSCAA)
57	ASST. COACH OF THE YEAR – BOYS	(NSCAA)
58	ASST. COACH OF THE YEAR – GIRLS	(NSCAA)

## **OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION LIST OF OSSCA HONORS FORMS**

**OSSCA FORM 49h**

DESCRIPTION OF ORGANIZATION OF FORMS

**THIS FORM IS FOR INTERNAL USE ONLY BY THE EXECUTIVE BOARD**

Forms 60 and up: Outdated forms for the archives.

61 & 61a	INDIVIDUAL SCHOLARSHIP FORM
62	OSSCA TEAM ACADEMIC AWARD – REASON FOR DENIAL
63	ACADEMIC AWARD NOMINATION

**CURRENT  
OSSCA  
HONORS  
FORMS**

**2017**

# OSSCA

## OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION

### HONORS PACKET

### PROCEDURES AND FORMS

LAST REVISION May 2016

For bookkeeping purposes, this form is called OSSCA form # 50.  
This is a copy of the NSCAA Players form that can be used in an emergency.  
The NSCAA and adidas logos will have to be cut and pasted on.  
Delete this underlined text before printing this document.

\*\*\*\*\*

**DIRECTIONS:** THIS IS THE WAY THE PLAYERS NAME , SCHOOL AND TEAM WILL APPEAR ON THE CERTIFICATE. THIS FORM MUST BE TYPED, NEAT AND ACCURATE.

\*\*\*\*\*

**PLAYER DATA**

PLAYER'S FIRST NAME \_\_\_\_\_ MIDDLE \_\_\_\_\_ LAST \_\_\_\_\_

COMPLETE SCHOOL NAME \_\_\_\_\_

SCHOOL LOCATION: CITY \_\_\_\_\_ STATE \_\_\_\_\_

PLAYER'S POSITION (G/D/M/F) \_\_\_\_\_ YEAR IN SCHOOL (FR/SO/JR/SR) \_\_\_\_\_

PREVIOUS APPEARANCES AS AN ALL-AMERICAN (1,2,3) \_\_\_\_\_

\*\*\*\*\*

**PLAYER'S HOME ADDRESS**

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: (     ) \_\_\_\_\_

\*\*\*\*\*

**COACHES DATA**

COACH'S FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

NSCAA MEMBERSHIP # \_\_\_\_\_ NSCAA REGION \_\_\_\_\_

COACH'S SCHOOL ADDRESS  
STREET: \_\_\_\_\_

COACH'S HOME ADDRESS  
STREET: \_\_\_\_\_

CITY: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: (     ) \_\_\_\_\_

PHONE: (     ) \_\_\_\_\_

FAX: (     ) \_\_\_\_\_

FAX: (     ) \_\_\_\_\_

\*\*\*\*\*

ATHLETIC DIRECTOR'S NAME \_\_\_\_\_ PHONE (     ) \_\_\_\_\_

\*\*\*\*\*

**MEDIA INFORMATION**

NEWSPAPER ADDRESS

TV STATION ADDRESS

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

STREET: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: (     ) \_\_\_\_\_

PHONE: (     ) \_\_\_\_\_

PLEASE BE SURE TO FILL THIS FORM OUT COMPLETELY ! IT IS IMPORTANT THAT ALL INFORMATION IS INCULDED AND THAT ALL INFORMATION IS LEGIBLE.

**OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION  
SCHOLARSHIP INFORMATION FORM -- ????** *OSSCA FORM 61*

This is currently an outdated form but kept in the archives for possible future use.

COVER SHEET FOR ALL NOMINEES. This form must be attached to all application packets.

NAME \_\_\_\_\_

S.S.# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (This is needed when the award is sent to the college)

ADDRESS \_\_\_\_\_

CITY, ZIP \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

SCHOOL \_\_\_\_\_

SCHOOL ADDRESS \_\_\_\_\_

CITY, ZIP \_\_\_\_\_

COACHES NAME \_\_\_\_\_

COACHES PHONE NUMBER \_\_\_\_\_

OSSCA DISTRICT \_\_\_\_\_

## SCHOLARSHIP APPLICATION INSTRUCTIONS

The OSSCA will present (2) \$1000, (2) \$750, (2) \$ 500 and (12) \$100 scholarships to selected seniors based on the following criteria:

Academic Potential  
Sportsmanship

Athletic Performance  
Community Service

Team Leadership

Each applicant is required to present the following in order to be considered for the OSSCA Scholarships. Failure to submit any of the required material may lead to the disqualification of a nominee.

1. A completed Scholarship Information Form attached as a cover sheet for all submitted materials.
2. A resume detailing their accomplishments based on the criteria outlined on FORM OSSCA 29a: Scholarship Criteria.
3. A reference letter from 3 soccer coaches. One may be from their own coach but 2 must be from coaches from other schools.
4. A reference letter from two teachers.
5. A reference letter from one community member.
6. Their picture sealed in an envelope, with the candidates name clearly printed on the outside of the envelope.

All materials must be submitted at the OSSCA All State Selection Meeting that is held at the end of each outdoor season.

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION SCHOLARSHIP CRITERIA --???? :

OSSCA FORM 61a

**This is currently an outdated form but kept in the archives for possible future use.**

1. Academic Potential
2. Athletic Performance
3. Team Leadership
4. Sportsmanship
5. Community Service

Each District will choose 1 Senior Boy and 1 Senior Girl to present at the OSSCA All State Voting Meeting that is held at the end of each fall season.

The OSSCA will award (2) \$1000, (2) \$750, (2) \$500 and (12) \$100 scholarships.

Each applicant must supply the following to be presented by the District at OSSCA All State Voting Meeting.

1. Complete the cover sheet with required information and attach it to the top of all papers presented.
2. A resume detailing their accomplishments based on the aforementioned criteria.
3. A reference letter from 3 soccer coaches. 1 may be from their own coach but 2 must be from coaches from other schools.
4. A reference letter from two teachers.
5. A reference letter from one community member.
6. Their picture sealed in an envelope. The picture will not be opened until after the OSSCA selection of scholarship winners and will be used in the *Ohio Athlete*, the official publication of the Ohio High School Athletic Association. (Pictures will not be returned)

Each District is required to bring 15 copies of each boy and girl nominees completed information to the OSSCA All State voting meeting.

**FAILURE TO COMPLY WITH THE ABOVE MAY LEAD TO THE  
DISQUALIFICATION OF A NOMINEE.**

# OHIO SCHOLASTIC SOCCER COACHES ASSOCIATION OSSCA TEAM ACADEMIC AWARD – REASON FOR DENIAL

## OSSCA FORM 62

**This is currently an outdated form but kept in the archives for possible future use.**

Dear Coach or Soccer Administrator,

You recently sent in information for the team academic award for your soccer team.

Your award application was denied for the following reasons.

\_\_\_\_\_ You failed to include a current team roster which is required and clearly requested on the Award Form.

\_\_\_\_\_ Your team roster did not match the names on the form, which is required and clearly requested on the Award Form.

\_\_\_\_\_ Your team did not qualify due to the GPA being under the 3.0 minimum requirement.  
YOU DO NOT QUALIFY FOR THE TEAM ACADEMIC AWARD.

\_\_\_\_\_ Your school information was not filled out completely and therefore the entire application was sent back to your district president.

YOU MAY NOT REAPPLY FOR THE TEAM ACADEMIC AWARD THIS SCHOOL YEAR.  
YOU NEED TO READ ALL DIRECTIONS AND FOLLOW THEM TO INSURE THAT YOUR  
TEAM WILL QUALIFY FOR TEAM ACADEMIC HONORS NEXT YEAR.

\_\_\_\_\_ This was a second incomplete form turned in by your school.

OSSCA VP - HONORS

