APPENDIX D – STATE ACADEMIC CHAMPION FORM

Name of Team and Division: _____

Name of School: _____

Name of Team Representative: _____

Telephone Number of Team Representative: _____

Email Address of Team Representative: _____

Instructions to Team Representatives: Identify, on the form below, the name and year of graduation of each player that participated on the program's highest Division team during the current season, and then submit the form to the Registrar at the schools attended by the team members. The team shall have at least 12 players to be eligible for consideration. If the team has players from more than one school, fill out and submit a separate form that identifies the applicable players for each school. Provide the Registrar with a stamped envelope addressed to the designated representative of the High School League Board.

Instructions to Registrars: Identify, on the form below, the unweighted GPA of each team member listed that was achieved during the last completed semester or trimester of school. This unweighted GPA shall represent the team member's GPA for one semester, not the individual's cumulative GPA. If the team member recently transferred to your school, identify the team member's GPA during her last completed semester or trimester at her prior school. If this information is not available, identify "Not Available" on the GPA form. Please sign the completed form then mail a copy directly to a representative of High School League Board by April 15. GPA information will be reviewed and used confidentially by the High School League Board in determining the girls' High School State Academic Champion.

Team Members Name	Year of Graduation	GPA

Team Members Name	Year of Graduation	GPA

Registrar's Name (Printed): _____

Registrar's Certification Signature: _____