

**MISSOURI HIGH SCHOOL BASEBALL COACHES ASSOCIATION
ASSISTANT BASEBALL COACH OF THE YEAR
NOMINATION FORM**

Name of Candidate: _____

Name of High School: _____ Classification: _____

Name of Head Baseball Coach: _____

Head Baseball Coach Phone: () _____

Head Baseball Coach E-mail: _____

Head Baseball Coach Cell Phone: () _____

Your current baseball record? _____ With current assistant? _____

NOMINEE INFO (You may use the back of this sheet or attach a resume)

Assistant Information

Teaching Assignment: _____ # of classes per day _____

Coaching Assignments(s): _____

Extras: (community involvement, religious affiliation, organizations):

How many years has he been your assistant? _____

How many total years has he been an assistant? _____

Has he ever been a Head baseball coach? ____ If so, where? _____

REMINDER:

THE ABOVE NOMINATION IS ONLY GOOD FOR THIS YEAR'S AWARD. IF YOU HAVE AN ASSISTANT DESERVING OF THE AWARD, YOU MUST SUBMIT A NEW FORM EACH AND EVERY YEAR TO HAVE THE ASSISTANT BE ELGIBLE FOR THE AWARD. THANK YOU!!!

PLEASE SEND THIS INFORMATION TO:

Dennis Lawson
#1 Trojan Drive
Potosi, Missouri 63664