



**DETROIT JEWISH NEWS
JEWISH ATHLETE OF THE YEAR
NOMINATION FORM**

Please print if not completing the form online

CONTACT INFORMATION

Athlete's Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	High School:
Athlete's Name:	High School Address:
Athlete's Address:	High School City/State/Zip
City/State/Zip:	High School Phone:
Athlete's Phone:	Athlete cumulative GPA:
Athlete's E-mail:	# of years athlete has spent in Michigan?
Mother's Name:	Father's Name:
Mother's Address:	Father's Address:
Mother's City/State/Zip:	Father's City/State/Zip:
Mother's Daytime Phone:	Father's Daytime Phone:
Mother's E-mail:	Father's E-mail:

ATHLETICS

(Please list all sport[s] played, along with stats, throughout the athlete's high school career)

Sport(s):	
FRESHMAN YEAR:	JUNIOR YEAR:
SOPHOMORE YEAR:	SENIOR YEAR:

All-American: Yes <input type="checkbox"/> No <input type="checkbox"/>	All-Region (State): Yes <input type="checkbox"/> No <input type="checkbox"/>	All-Conference: Yes <input type="checkbox"/> No <input type="checkbox"/>
Sport: Year:	Sport: Year:	Sport: Year:
All-Region (USA): Yes <input type="checkbox"/> No <input type="checkbox"/>	All-Metro: Yes <input type="checkbox"/> No <input type="checkbox"/>	Maccabi Athlete: Yes <input type="checkbox"/> No <input type="checkbox"/>
Sport: Year:	Sport: Year:	Sport: Year:
Dream Team: Yes <input type="checkbox"/> No <input type="checkbox"/>	All-County: Yes <input type="checkbox"/> No <input type="checkbox"/>	Please list any other:
Sport: Year:		Sport: Year:
<u>Accolades Awarded This Season:</u>		
All-State: Yes <input type="checkbox"/> No <input type="checkbox"/>	All-Area: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Sport:	Sport:	

REFERENCES

Coach's Name: Coach's Phone: Coach's E-mail: Athletic Director's Name: Athletic Director's Phone:	Please list any other references and contact info:
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ATHLETICS OUTSIDE OF HIGH SCHOOL

Please include any outside school leagues in which the athlete has competed:

What college will the athlete attend? _____

What sport will the athlete be playing, if any? _____

Did the athlete receive an athletic scholarship? Yes No

Is the athlete going to tryout for the college team? Yes No

Is the athlete a preferred walk-on to play sports? Yes No

Was the athlete drafted professionally? Yes No

Has the athlete played for any Olympic team or an Olympic qualifying team? Yes No

CONFLICT OF INTEREST

Are any Michigan Jewish Sports Foundation Board or committee members related to the athlete?

Yes No

If yes, please list their name(s) and relationship:

CRIMINAL BACKGROUND**INJURIES**

**Has the athlete been convicted of a crime?
(This does not include traffic or parking tickets)**

Yes No

If yes, please explain.

Please list any injuries the athlete has sustained:

ARTICLES/VIDEOS

Please electronically attach any articles/video of the athlete's career or send to:

Michigan Jewish Sports Foundation
6632 Telegraph Road #304
Bloomfield Hills, MI 48301
Phone (248) 592-9323
<http://www.michiganjewishsports.org>

Please include athlete's senior photo or email high resolution JPEG.

NOTES

Please include any additional materials or information here:

Nominator's

Name: _____

Nominator's

Address _____

Nominator's Daytime Contact Number: _____

Nominator's Evening Contact Number: _____

Date: _____

Checklist:

- Nomination Form
- Resume of high school sports and extra-curricular activities.
Include leadership positions, if any
- Senior Picture/Wallet-Size Photo or email high resolution JPEG
- One Letter of Reference, including contact information
- Copies of any articles about the applicant

DEADLINE: JUNE 11, 2020

Applicants will be notified by July 1, 2020

FOR FURTHER QUESTIONS PLEASE CONTACT:

Sari Cicurel – Executive Director
(248) 592.9323 , 248-766-0945 or email at scicurel@michiganjewishsports.org

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www.michiganjewishsports.org
www.facebook.com/michiganjewishsports

The Michigan Jewish Sports Foundation is a 501(c)(3) philanthropic organization committed to the support of cancer charities and bettering the lives of children.