

HEAD COACH'S RECOMMENDATION

Coach's Name: _____

Name of School: _____

School Phone (including area code): _____

School Address: _____

Nominee's Name: _____ Position: _____

Male: Female Age: _____ Height: _____ Weight: _____

Number of years played varsity hockey, including current season: _____

Team Captain? Yes No How many years? _____

TEAM/INSTITUTIONAL DATA

Team Name: _____

Please list all available statistical information regarding the nominee, including varsity career statistics and school records broken or tied. Copies of individual statistics for each year of participation should be attached:

Please comment on the nominee's athletic performance, noting both overall athletic ability and any outstanding qualities of character, leadership and achievement that would recommend the student for the Pittsburgh Penguins/Bob Johnson Memorial Scholarship:

Please indicate where the nominee would rank among all the players at the student's position you have had on your teams over the past _____ years: _____

Please rate the nominee on the following:

	Superlative	Excellent	Good	Average
Athletic Ability	_____	_____	_____	_____
Character	_____	_____	_____	_____
Leadership	_____	_____	_____	_____
Effort	_____	_____	_____	_____

Signed _____ Date _____