**2020 NHSACA NATIONAL COTY NOMINEES**

**National High School Athletic Coaches Association COTY Nominees**

**From the state of:**

**From the**      *(state association)*

**A nominee who was a 2018 or 2019 NHSACA National COTY Award Finalist or COTY Award Recipient in another category is not eligible** for nomination for the 2020 Award. Please complete the following form with the nominees’ full name, school, city-state-zip address, and **e-mail** address; note the two lines of information requested for each sport. Special Sports includes any sport not individually found on the list and includes Cheer Coaches. **All individual forms that each COTY nominee completes and returns are found on our website. The entire process will be completed electronically this year. Our website is:** [**www.nhsaca.org**](http://www.nhsaca.org) **The instruction document for completing the nominee form is found on the website as well.**

Read the items **A-E** to determine if your nominees are eligible for the 2019 NHSACA National COTY.

1. Were you a NHSACA Coach of the Year finalist in 2018?
2. Were you a NHSACA Coach of the Year finalist in 2019?
3. Were you a NHSACA Coach of the Year in 2018?
4. Were you a NHSACA Coach of the Year in 2019?
5. Have you received the NHSACA Coach of the Year Award in this sport previously?

If you answered yes to A, B, C, D, or E you are **NOT ELIGIBLE** to complete this document this year. (Please notify the National Office of this situation)

 **\*\* All Nominees must be active head coaches for the category they are nominated in for the**

 **current NHSACA National COTY Award Program (2018-19): OR**

 **State Associations may nominate a retired coach for the NHSACA National Coach of the**

 **Year Awards program following the criteria below:**

1. **The coach may not be retired for more than two years in the category they are nominated in. (i.e. nominations for the 2020 COTY Awards Program are based on the coach’s career through the 2018-19 school year. The retired coach to be nominated could not have retired prior to the 2017-18 school year.)**
2. **The retired coach nominated may not have been a finalist in the sport they are nominated in during the previous two years.**
3. **The retired coach nominated may not have been a national COTY recipient in any category during the previous two years.**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Athletic Director**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Baseball**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Basketball-Boys’**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Basketball-Girls’**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Cross Country**

**Boys’**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Cross Country**

**Girls’**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Football**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Golf**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Soccer**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Softball**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Special Sports**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Swimming &**

**Diving**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Tennis**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Track & Field**

**Boys’**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Track & Field**

**Girls’**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Volleyball**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Wrestling**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Assistant COTY**

**Boys’**

|  |  |
| --- | --- |
| **Full Name** | **School** |
|       |       |
| **City, State, Zip** | **E-mail Address** |
|       |       |

**Assistant COTY**

**Girls’**

*(Executive Secretary’s Electronic Signature)\*\**

*(Date)*

**\*\*** The Executive Secretary’s Electronic signature indicates that all nominees listed on this form are in good standing with their Coaches Association.

NHSACA National Coach of the Year Awards Banquet will be held at the Great Hall located in the Old Train Station-Haymarket, Lincoln, NE on Thursday, July 23, 2020; in conjunction with the NHSACA National Coaches Convention.

Return **BEFORE October 25th, 2019** online or if you want a hardcopy, notify me and I will send a hardcopy for you to return in an envelope. If your Board of Directors, or committee choosing these nominees will be meeting after October 25th, please shoot me an email letting me know when you would expect to be able send this roster to me.

\*\*\*The NHSACA National COTY program will advance the top nominee (as scored in this process) from each of the six organized regions. The two remaining finalists will be the top scoring nominees who did not advance as a top scorer from a region.