



**3<sup>rd</sup> ANNUAL  
BGO NIGHT OF CHAMPIONS**

***“BGO ACHIEVEMENT AWARD”***

**\$ 250 SCHOLARSHIP**

**NOMINATION FORM**

# BGO “Achievement” Award

Bluegrass Orthopaedics is seeking nominations for the 3<sup>rd</sup> Annual BGO Night of Champions – *Achievement Award*. This award is unique as it honors student-athletes at the high school level from the central Kentucky area who have distinguished themselves in the classroom, in their community, on the playing field/court, and have been high achievers in every aspect of their life. **Recipients receive an individual award, gift, and scholarship to the amount of \$250.00.**

Our Board of Directors is asking guidance counselors, athletic directors, coaches, athletic trainers, and other school administration to nominate student-athlete(s) who satisfy the criteria set forth in this form. Multiple nominees from each school are appreciated. **The board will select one winner from *each* high school in central Kentucky area as the “BGO Achievement Award” winner.**

## Nomination Criteria

1. Nominee can be a **senior** in high school.
2. Nominee must be in good academic standing. Student-athlete must be a member of the athletic team(s) during the 2018-19 academic year.
3. Student-athlete must consistently demonstrate good sportsmanship and ethical behavior on and off the playing field.
4. Student-athlete must demonstrate leadership abilities in school activities or through work experiences.
5. Student-athlete must demonstrate a strong commitment to and involvement in community/volunteer service.
6. Nominee must be able to attend awards presentation dinner on Thursday April 18<sup>th</sup>, 2019 at the Marriott – Griffin Gate Hotel.

## Nominations Guidelines

1. Each high school may nominate **1-5 student-athlete(s)** that satisfy the criteria.
2. You may include two letters of recommendation.
3. All nominees must satisfy the criteria.
4. The scholarship recipients will be informed by **March 13<sup>th</sup>, 2019**.

## Selection Process

1. Nominations will be reviewed by the BGO Night of Champions Planning Committee.
2. The committee will then select a winner from *each* high school.

## **Key Dates**

1. Nomination Deadline – February 14<sup>th</sup>, 2019
2. Award Winners Announced – March 13<sup>th</sup>, 2019
3. Award Presented at the BGO Night of Champions at the Marriot – Griffin Gate Hotel, Lexington, KY – Thursday April 18<sup>th</sup>, 2019.

## **For further information contact:**

Andrew Carlson, MS, ATC

Telephone: 859-361-6965

Email: [andrew.carlson@bluegrassortho.com](mailto:andrew.carlson@bluegrassortho.com)

**NOMINATIONS MUST BE POSTMARKED OR EMAILED BY FEBRUARY 14<sup>th</sup>, 2019**

# NOMINATION INFORMATION

(Please type or print all information)

Name of Nominee: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Nominee Phone: \_\_\_\_\_

Nominee Email: \_\_\_\_\_

Parent's/Guardian's Name: \_\_\_\_\_

Parent's/Guardian's Cell Phone Number: \_\_\_\_\_

Parent's/Guardian's Email: \_\_\_\_\_

Name of Institution: \_\_\_\_\_

Sport(s): \_\_\_\_\_

Nominee's Grade Point Average:    Weighted: \_\_\_\_\_    Unweighted: \_\_\_\_\_

Nominee's Class Rank (at time of submission): \_\_\_\_\_ / \_\_\_\_\_

Gender:     Male     Female

Shirt Size:     XS     S     M     L     XL     XXL

**Honors and Achievements:**

## AWARD NARRATIVE

Please complete the following information, if further space is required, you may include additional pages.

**Name of Nominee:** \_\_\_\_\_

**Institution:** \_\_\_\_\_

Describe the student-athlete's impact on their school, athletic team, community, and why they are appropriate for this award. How have they excelled beyond expectations in the respective sport(s) and daily life?

Describe how the nominee has demonstrated good sportsmanship and ethical behavior on and off the playing field. Also include community service and volunteer work.

**Note: Nominations may include two letters of recommendation (See End of Form)**

# CERTIFICATION OF NOMINATION

I attest that the nomination criteria have been satisfied and the information is accurate.

Director of Athletics Signature: \_\_\_\_\_

Coach of Nominee's Principal Sport: \_\_\_\_\_

## Information on Person Making Nomination

Name: \_\_\_\_\_ Position: \_\_\_\_\_

School: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

## Promotional Information

Name of Institution's Sports Information Director: \_\_\_\_\_

Sports Information Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Nominee's Hometown Newspaper: \_\_\_\_\_

## **Send Nomination to:**

Bluegrass Orthopaedics

Attn: Andrew Carlson, MS, ATC

3480 Yorkshire Medical Park

Lexington, KY 40509

[andrew.carlson@bluegrassortho.com](mailto:andrew.carlson@bluegrassortho.com)

**Nominations Must Be Post-Marked or Emailed By February 14<sup>th</sup>, 2019**

## RECOMMENDATION #1 (OPTIONAL)

## RECOMMENDATION #2 (OPTIONAL)