

**FALL MALE  
LEAGUE REP INFORMATIONAL SHEET**

Thank you for your work as league representative to the PSCA. Organizing the coaches in your league will assist the PSCA in assuring that the players and coaches in your league get recognized at the state and national level. **Please be aware that the deadline for “Fall Male Leagues” to report all information to the PSCA is November 1st of each year.** It will be important for you to contact coaches, hold all-star voting and get paper work to the PSCA before this date. Failure for a league to report by the deadline will result in a loss of recognition. I sincerely hope you can understand our dilemma when trying to organize over 50 girls leagues both spring and fall and boy’s leagues. The last thing we want to do is not give recognition to deserving players and coaches from your league. I have listed a checklist below for items that we need by the deadline. If you can't attend to these tasks, forward this material to another coach within your league and contact me with the change. Please throw away old forms as we have had a restructuring and new forms are enclosed. We also have forms on line at [pasoccercoaches.org](http://pasoccercoaches.org), which can be downloaded. Please have your league meeting to select your All-State player(s) before November 1st.

1. **Collect Membership Dues**- Application Form is enclosed  
If coaches coached last spring please note if paid.  
Use the Summary Membership Form and send with Applications to:  
**Anthony Cavallaro; 147 Rose Lane; Matamoras, Pa 18336**  
Home (570) 491-2485 [ascavallaro@optonline.net](mailto:ascavallaro@optonline.net)
  
2. **Annual Statistics Report Sheet** – This is the order in which teams in your league finished with their records. This will be posted on the Internet this year at the end of your season. This report should be mailed by November 1st to:  
**Patrick Birns; 213 Westley Place; Allentown, PA 18104**  
Cell 845 313-1462; email [birnsp@gmail.com](mailto:birnsp@gmail.com)
  
3. **Select All-State Players(s)** – Based on Head Coach PSCA Membership Complete form must be sent with All-State Information sheet, player profile & NSCAA All-America Form to:  
**Brandon Ramsey; 3507 North 4th Street; Harrisburg, PA 17110**  
Cell: 717-525-2081  
Email: [bmr721@hotmail.com](mailto:bmr721@hotmail.com)
  
4. **Coach of the Year**- Send enclosed forms to:  
**Scott Bonagura, 177 Elizabeth Street, Hawley, PA 18428**  
Cell phone: 570-242-4020; E-mail: [bonagura4@yahoo.com](mailto:bonagura4@yahoo.com)
  
5. **Honor Award, Hall of Fame & Service Award Nominations** should be sent to:  
**Randy Rich, 303 Fourth Street Box 48, Summerdale, Pa 17093**  
Home (717) 732-0225; Work (717) 258-6484; E-mail: [rsr@mail.bubblers.k12.us](mailto:rsr@mail.bubblers.k12.us)  
Please take the time to give recognition to people past and present that have helped the game of soccer in your area.
  
6. **Other Statistics and Records**- Forms are enclosed for PSCA report to NSCAA, District Results, High Schools Career Record and Individual Coaching Record. Mail these to:  
**Patrick Birns; 213 Westley Place; Allentown, PA 18104**  
Cell 845 313-1462; email: [birnsp@gmail.com](mailto:birnsp@gmail.com)

The formula used for the selection of All-State players is as follows:  
ALL-STATE PLAYER IS DETERMINED BY THE NUMBER OF PAID HEAD COACHES IN THE LEAGUE:

1-8	Teams in League	1-8 Paid Head Coaches	1 Player Nominated.
9-16	Teams in League	9-16 Paid Head Coaches	2 Players Nominated.
17-24	Teams in League	17-24 Paid Head Coaches-	3 Players Nominated.
25-32	Teams in League	25-32 Paid Head Coaches	4 Players Nominated.
33-40	Teams in League	33-40 Paid Head Coaches-	5 Players Nominated.
41-48	Teams in League	41-48 Paid Head Coaches	6 Players Nominated.
49-56	Teams in League	49-56 Paid Head Coaches	7 Players Nominated.
57-64	Teams in League	57-64 Paid Head Coaches	8 Players Nominated.
65-72	Teams in League	65-72 Paid Head Coaches	9 Players Nominated.
73-80	Teams in League	73-80 Paid Head Coaches	10 Players Nominated.
81-88	Teams in League	81-88 Paid Head Coaches	11 Players Nominated.
89-96	Teams in League	89-96 Paid Head Coaches	12 Players Nominated.
97-104	Teams in League	97-104 Paid Head Coaches	13 Players Nominated.
105-112	Teams in League	105-112 Paid Head Coaches	14 Players Nominated.

\* The All-State team for the Female Spring Leagues will be published with the Female Fall Leagues. These players are combined to determine the NSCAA All-America for the year.

I hope that my outline above has made it easy for you to understand the responsibilities of the league representative across the state. Please use our web-site [pasoccercoaches.org](http://pasoccercoaches.org) as an informational tool. Please contact me through email [ascavallaro@optonline.net](mailto:ascavallaro@optonline.net) should you have any questions.

The PSCA has been fortunate to have the support of **Brine** and **Angelo's Soccer Corner**. Please support our sponsors by considering their products and clinics.

PSCA membership plays an important role in honoring players and coaches. We are able through your membership and the membership of coaches from your league to hold a banquet, award certificates and give plaques and trophies to the best in Pennsylvania soccer. Encourage every coach in your league to become a member of the PSCA.

Thank you in advance for your work!

Yours in Soccer,

Anthony P. Cavallaro  
Executive Secretary – Pennsylvania Soccer Coaches Association







**ANNUAL STATISTICAL REPORT  
PENNSYLVANIA SOCCER COACHES ASSOCIATION**

**INSTRUCTIONS: The Rep should send this completed form with membership  
by May 31, (Spring Leagues) and November 1, (Fall Leagues) to:**

**Patrick Birns  
213 Westley Place  
Allentown, PA 18104**

**SCHOOL YEAR:** *(circle one)* **Spring / Fall :** 20\_\_\_\_ *(Fill in year)*

**Soccer League Reporting:** \_\_\_\_\_ **League Rep:** \_\_\_\_\_

*Please list teams in order of finish – first to last in league play*

	SCHOOL	COACH	RECORDS	
			League	Overall
<b>Name:</b> <b>Address:</b> <b>Phone:</b> <b>Email:</b>				
<b>Name:</b> <b>Address:</b> <b>Phone:</b> <b>Email:</b>				
<b>Name:</b> <b>Address:</b> <b>Phone:</b> <b>Email:</b>				
<b>Name:</b> <b>Address:</b> <b>Phone:</b> <b>Email:</b>				

*Copy or download additional forms as needed.*

# PSCA MALE ALL-STATE INFORMATION SHEET

PLEASE PRINT ALL INFORMATION AND COMPLETE IN FULL

RETURN THIS FORM NO LATER THAN NOVEMBER 1, (FALL LEAGUES) TO:

**Brandon Ramsey**  
**3507 North 4th Street**  
**Harrisburg, PA 17110**  
**Email: bmr721@hotmail.com**

LEAGUE: \_\_\_\_\_ LEAGUE REPRESENTATIVE: \_\_\_\_\_

SEASON: FALL/SPRING \_\_\_\_\_ DISTRICT: \_\_\_\_\_

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## PLAYER'S DATA

NAME: \_\_\_\_\_ GRADE: 9/10/11/12

STREET ADDRESS: \_\_\_\_\_ PHONE:(\_\_\_\_) \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PLAYER'S RANK IN LEAGUE VOTING (FIRST IS BEST): 1<sup>ST</sup> 2<sup>ND</sup> 3<sup>RD</sup> 4<sup>TH</sup> 5<sup>TH</sup>

PLAYER'S POSITION: GOALKEEPER DEFENDER MIDFIELDER FORWARD

PLAYER'S SCHOOL: \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

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## COACH'S DATA

NAME: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PAID MEMBERSHIP TO PSCA: \_\_\_\_\_ NSCAA MEMBERSHIP #: \_\_\_\_\_

(Please note, a coach must be a NSCAA member to have a Regional All-America Player. The coach must nominate that player by typing the NSCAA form. All PSCA All-State Players are eligible to be All-Region players.)

**ALL-STATE PLAYER INFORMATION SHEETS MUST BE GIVEN TO YOUR LEAGUE REP WHO WILL SEND THEM TO THE ALL-STATE/ALL-AMERICA COMMITTEE CHAIRMAN.**

**PLEASE NOTE, ONLY NOMINEES RECEIVED BY THE FOLLOWING DATES WITH PSCA AND NSCAA FORMS ATTACHED WILL BE ELIGIBLE FOR ALL REGIONAL AND NATIONAL RECOGNITION.**

**MAY 31<sup>ST</sup> – SPRING LEAGUES**  
**NOVEMBER 1<sup>ST</sup> – FALL LEAGUES**

**\*\*PLEASE COMPLETE THE PROFILE INFORMATION ON THE BACK OF THIS FORM\*\***

# PLAYER PROFILE

RETURN THIS FORM WITH THE ALL-STATE INFORMATIONAL SHEET  
NO LATER THAN NOVEMBER 1, (FALL LEAGUES) TO:

Brandon Ramsey  
3507 North 4th Street  
Harrisburg, PA 17110

Email: bmr721@hotmail.com

## INFORMATION TO SUPPORT ALL-STATE PLAYERS NOMINATION FOR ALL- REGION AND ALL-AMERICA

NAME: \_\_\_\_\_

SCHOOL: \_\_\_\_\_

COACH: \_\_\_\_\_ COACH'S PHONE: \_\_\_\_\_

ATHLETIC DIRECTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

CLASS: SENIOR                      JUNIOR                      SOPHOMORE                      FRESHMAN

NUMBER OF YEARS SELECTED AS AN ALL-STATE PLAYER, INCLUDING THIS YEAR: 1 2 3 4

HAS THE PLAYER BEEN AN ALL-REGION PLAYER IN THE PAST? \_\_\_\_\_ YEARS: \_\_\_\_\_

OTHER AWARDS:

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	CURRENT	CAREER
GOALS	_____	_____
ASSISTS	_____	_____
SAVES	_____	_____
SHUTOUTS	_____	_____

OTHER USEFUL INFORMATION:

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PLEASE BE SURE TO FILL THIS FORM OUT COMPLETELY AND THAT ALL INFORMATION IS  
LEGIBLE. UNLESS OTHERWISE INDICATED, CERTIFICATES WILL BE MAILED TO THE SCHOOL IF  
THE PLAYER DOES NOT ATTEND THE NSCAA ANNUAL CONVENTION.

# **PROCEDURES FOR ALL-REGIONAL AND ALL-AMERICAN PLAYER SELECTION**

## **ALL-REGION/ALL-AMERICA**

Allotment to the NSCAA All-Region and All-America teams is determined by the number of NSCAA member coaches within each state. Pennsylvania is entitled to a certain number of players based on that membership total. Each state is required to rank its allotted players and submit the list to the All-America Chairman of the NSCAA. In Pennsylvania we use the All-State team as a base list. Some leagues are not included on the All-America ballot because they do not submit names by the November 1 deadline. Thus, some outstanding players do not appear on the All-America ballot but will be recognized on the All-State team. Once ranked, players are verified by checking to see if their coach is an NSCAA member. The coach is then responsible to submit the information about their player to the NSCAA through the NSCAA website.

In Pennsylvania, the PSCA has decided upon a ballot system involving a number of high school coaches geographically distributed throughout the state. Open communication and evaluation of players between the committee members is encouraged. The coaches are asked to rank the top players in order. Ballots are then returned to the All-State Chairman. The ballots are tallied and then the players are ranked based on the votes received. This list is then forwarded to the national regional chairman for publication and notification. The coaches whose player is selected must be a member of the National Soccer Coaches Association and then register the player on-line with the NSCAA to complete the selection process.

If additional information is needed about these procedures, please feel free to contact the Chairman of the All-State Committee:

### **GIRLS CHAIRMAN**

Keith Nagley  
565 Oak Ridge Drive  
Millersville, PA 17551  
Home: 717-468-1467  
Fax: 717-618-0999  
E-mail: [kneggs@comcast.net](mailto:kneggs@comcast.net) or  
[keith\\_nagley@hempfieldsd.org](mailto:keith_nagley@hempfieldsd.org)

### **BOYS CHAIRMAN**

Brandon Ramsey  
3507 North 4<sup>th</sup> Street  
Harrisburg, PA 17110  
Cell Phone: 717-525-2081  
E-mail: [bmr721@hotmail.com](mailto:bmr721@hotmail.com)

## **PSCA Coach of the Year Nominations**

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### **Criteria to consider for nominating a coach:**

- A. Coach must be a member of the PSCA**
- B. Coach must have a winning record**
- C. Coach should exhibit knowledge of the game through his understanding of rules, systems of play, and coaching philosophy.**
- D. Coach should display a strong rapport with his players and have their respect.**
- E. Coach should have developed an appropriate relationship with game officials by displaying respect, using acceptable methods for questioning, and avoiding disruptive behavior.**
- F. Coach should display the conduct of a gentleman on the game field that is exhibited by positive behavior.**
- G. Coach should be involved with your local soccer coach's organization.**
- H. Coach should display involvement with outside organizations such as camps, clinics and coaching conventions.**
- I. Coach should be involved with community programs.**
- J. Coach should have developed a good rapport with other coaches by being cooperative, considerate, and being positive with game related media statements.**

### **Nominating Directions:**

- 1. A league representative or coach must submit a written nomination stating qualifications. (You should use the reverse side of this form.)**
- 2. A resume may also be submitted, in addition to this form, to further illustrate the coach's qualifications.**
- 3. The coach of any team in the state finals will automatically be eligible for Coach of the Year honors as one of the nominees.**

Send nomination form by May 31<sup>st</sup> Spring Girls and November 1<sup>st</sup> Fall Boys/Girls to:  
Scott Bonagura, 177 Elizabeth Street, Hawley, PA 18428 Cell phone: 570-242-4020;  
(copies can be emailed if you request form by e-mail) E-mail: bonagura4@yahoo.com

# PSCA COACH OF THE YEAR APPLICATION AND RESUME

Send nomination form by May 31<sup>st</sup> Spring Girls and November 1<sup>st</sup> Fall Boys/Girls to:  
Scott Bonagura, 177 Elizabeth Street, Hawley, PA 18428  
Cell phone: 570-242-4020; E-mail: bonagura4@yahoo.com

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## Coaches Name and School Information

Coach's First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_  
School \_\_\_\_\_ League \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ NSCAA Region EAST  
**Please Circle:** School Classification AAA / AA / A      Team Gender Male / Female

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## Coaches Background Information

College Graduated from \_\_\_\_\_ Year \_\_\_\_\_  
Number of Years Coaching Varsity \_\_\_\_\_ NSCAA Member # \_\_\_\_\_  
Any Previous Coaching Honors \_\_\_\_\_

Coaching Diplomas/Licenses/ \_\_\_\_\_

Overall Varsity Coaching Record    Won \_\_\_\_\_    Lost \_\_\_\_\_    Tied \_\_\_\_\_  
Current Season Record                Won \_\_\_\_\_    Lost \_\_\_\_\_    Tied \_\_\_\_\_  
Previous Team Honors (Championships Etc.) \_\_\_\_\_

Current Team Honors \_\_\_\_\_

Clinics Attended and # of Years \_\_\_\_\_

Camps Worked \_\_\_\_\_

Coach's Home Mailing Address	Coach's School Mailing Address
Street _____	Street _____
City _____	City _____
State _____ Zip _____	State _____ Zip _____
Phone # _____	Phone # _____
Email: _____	Email: _____
Athletic Director's Name _____	Phone# _____

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## Media Information

Local Newspaper: Name _____	Local Television: Name _____
Street _____	Street _____
City _____	City _____
State _____ Zip _____	State _____ Zip _____
Phone _____	Phone _____

Please fill out form completely! Type or print all information legibly. A maximum one (1) page resume may be attached with any other information that you feel is pertinent.

# **PENNSYLVANIA SOCCER COACHES ASSOCIATION HONOR AWARD**

The Pennsylvania Soccer Coaches Association has codified the criteria for the Association's Honor Award. This award is presented by the Association in recognition of special contributions to the sport of soccer.

The Honor Award is the highest award the PSCA presents. Enclosed is a copy of the criteria sheet and nomination form.

As a member of the Pennsylvania Soccer Coaches Association, please consider candidates for this award. Download the official criteria and nomination forms and send to the Honor Award Committee chairperson:

**Randy Rich**

**303 Fourth Street**

**Box 48**

**Summerdale, PA 17093**

**Home Phone: 717-732-0225**

**School Phone: 717-258-6484**

**E-mail: [rsr@mail.bubblers.k12.pa.us](mailto:rsr@mail.bubblers.k12.pa.us)**

# PENNSYLVANIA STATE SOCCER COACHES ASSOCIATION HONOR AWARD

## **PURPOSE:**

To recognize a person who has made outstanding contributions to the sport of soccer.

## **AWARD:**

It will be given by the Pennsylvania Soccer Coaches Association as the highest level of recognition bestowed upon an individual by the organization. Only one award will be given per calendar year.

## **ELIGIBILITY CRITERIA:**

1. Should have a minimum of 10 cumulative years of soccer in the state of Pennsylvania.
2. Should have demonstrated the highest ethical standards throughout his/her career.
3. Should be respected by their peers.
4. Must have made extraordinary contributions to the sport of soccer in any capacity.
5. Should have demonstrated outstanding leadership, dependability, and a clear sense of purpose in their soccer involvement.

## **GENERAL INFORMATION:**

1. Nominations are to be made **only** by Pennsylvania Soccer Coaches Association members and **only** on the official nomination form. It is to be submitted **only** through the league representatives to the Pennsylvania Soccer Coaches Association or the President of the same organization.
2. The Pennsylvania Soccer Coaches Association Honor Award nominees will be reviewed by a committee appointed by the President.
3. Individuals can be nominated any number of years, but are only eligible to receive the award one time.
4. Deadline for submitting a nomination will be the last day in September.
5. The Honor Award committee reserves the right to not give the award. This is not a guaranteed annual award.

## **AWARD CEREMONY:**

1. This shall take place on a date and site to be decided upon by the committee. If it is possible the ceremony will be held at a place where the Honoree can best be seen and supported by family and friends.
2. All publicity concerning the event will be handled by the awards committee.

# PSCA NOMINATION FORM FOR HONOR AWARD

Mail to:

**Randy Rich; 303 Fourth Street, Box 48**

**Summerdale, PA 17093**

**Home: 717-732-0225 School: 717-258-6484**

**E-mail: [rsr@mail.bubblers.k12.pa.us](mailto:rsr@mail.bubblers.k12.pa.us)**

Your

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

Work

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

Work Phone

Number: \_\_\_\_\_

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

Home Phone

Number: \_\_\_\_\_

Name of

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

Address of

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

Profession: \_\_\_\_\_

Where

Employed: \_\_\_\_\_

How long have you known the nominee and in what capacity? BE VERY CLEAR THAT  
NOMINEE MEETS THE HONOR AWARD CRITERIA.

\_\_\_\_\_  
Please use the back of this form to give a statement setting forth the personal  
contributions, honors received, soccer achievements, etc. that he/she has accomplished  
in their career. Please be detailed.



# **PENNSYLVANIA SOCCER COACHES ASSOCIATION HALL OF FAME AWARD**

## **THE AWARD**

The PSCA Hall of Fame Award is bestowed upon an individual whose career has merited recognition for their impact on high school soccer in the state of Pennsylvania.

## **GENERAL INFORMATION**

1. The award may be given annually to any number of nominees.
2. Nominees should have a minimum of 5 cumulative years of soccer service in the state of Pennsylvania.
3. Nominees must be retired from active coaching.
4. Individuals can be nominated any number of years but are only eligible to receive the award one time.
5. Only Pennsylvania Soccer Coaches Association members can make nominations and it must be on the official nomination form.
6. The Pennsylvania Soccer Coaches Association's Hall of Fame Award nominees will be reviewed and chosen by the Hall of Fame Committee.
7. National Hall of Fame recipients will automatically be nominated for the PSCA Hall of Fame Award.
8. PSCA Honor Award recipients automatically enter the PSCA Hall of Fame.
9. Send completed form to the Chairman of the Hall of Fame Awards Committee by the last day of September.

Randy Rich  
303 Fourth Street  
Box 48  
Summerdale, PA 17093  
Home Phone: 717-732-0225  
School Phone: 717-258-6484  
E-mail: [rsr@mail.bubblers.k12.pa.us](mailto:rsr@mail.bubblers.k12.pa.us)

# PSCA NOMINATION FORM FOR HALL OF FAME AWARD

Mail to:

**Randy Rich; 303 Fourth Street, Box 48**

**Summerdale, PA 17093**

**Home: 717-732-0225 School: 717-258-6484**

**E-mail: [rsr@mail.bubblers.k12.pa.us](mailto:rsr@mail.bubblers.k12.pa.us)**

Your

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

Work

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

Work Phone

Number: \_\_\_\_\_

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

Home Phone

Number: \_\_\_\_\_

Name of

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

Address of

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

Profession: \_\_\_\_\_

Where

Employed: \_\_\_\_\_

How long have you known the nominee and in what capacity? BE VERY CLEAR THAT  
NOMINEE MEETS THE HALL OF FAME AWARD CRITERIA.

\_\_\_\_\_  
Please use the back of this form to give a statement setting forth the personal  
contributions, honors received, soccer achievements, etc. that he/she has accomplished  
in their career. Please be detailed.



PENNSYLVANIA SOCCER COACHES ASSOCIATION  
**GERALD BOTDORF "SERVICE AWARD"**

**THE AWARD**

This award is bestowed upon an individual or coach; a representative of the media; a company or entity who, through their efforts, deeds, writings, activities and programs, creates/created a very positive spirit and image of/for the game.

**GENERAL INFORMATION**

1. The award will be given annually to one nominee.
2. Individuals/entities can be nominated any number of years but are only eligible to receive the award one time.
3. Only Pennsylvania Soccer Coaches Association members can make nominations and it must be on the official nomination form.
4. The nominees will be reviewed and chosen by The Gerald Botdorf PSCA Soccer Service Award Committee.
5. Send completed form to the Chairman of the Soccer Service Committee by the last day of September.

Randy Rich  
303 Fourth Street  
Box 48  
Summerdale, PA 17093  
Home Phone: (717) 732-0225  
School Phone: (717) 258-6484  
E-mail: [rsr@mail.bubblers.k12.pa.us](mailto:rsr@mail.bubblers.k12.pa.us)

**PSCA NOMINATION FORM FOR  
GERALD BOTDORF "SERVICE" AWARD"**

**Mail to:**

**Randy Rich; 303 Fourth Street, Box 48**

**Summerdale, PA 17093**

**Home: 717-732-0225 School: 717-258-6484**

**E-mail: [rsr@mail.bubblers.k12.pa.us](mailto:rsr@mail.bubblers.k12.pa.us)**

Your

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

Work

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

Work Phone

Number: \_\_\_\_\_

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

Home Phone

Number: \_\_\_\_\_

Name of

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

Address of

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

Profession: \_\_\_\_\_

Where

Employed: \_\_\_\_\_

How long have you known the nominee and in what capacity? BE VERY CLEAR THAT  
NOMINEE MEETS SERVICE AWARD CRITERIA.

\_\_\_\_\_  
Please use the back of this form to give a statement setting forth the personal  
contributions, honors received, soccer achievements, etc. that he/she has accomplished  
in their career. Please be detailed.



# PSCA Report to the NSCAA

## STATISTICS FOR THE MALE/FEMALE SIDE OF THE GAME

**MAIL To:**  
**Patrick Birns; 213 Westley Place**  
**Allentown, PA 18104 birnsp@gmail.com**

DIRECTIONS AND COMMENTS: This paper will serve as a guide for the categories available. Send in your stats on other paper and keep this as a reference. These stats are for high school level of play only. The numbers should reflect anything from your total games played, not just league play, but your overall record for that playing season(s). District refers to the divisions of Pennsylvania. All years on this sheet should be recorded as a school year. If the record relates to the 1994 soccer season it should be recorded as the school year 1994-1995. After the coach puts together these stats, send them to your League Rep. He/She in turn will mail them to the PSCA Statistician.

### TEAM RECORDS

***Consecutive Win Streak--15 or more games.***

High School: \_\_\_\_\_ District \_\_\_\_\_  
Year(s) \_\_\_\_\_ # of Games \_\_\_\_\_

***Consecutive No-Loss Streak--15 or more.***

High School: \_\_\_\_\_ District \_\_\_\_\_  
Year(s) \_\_\_\_\_ # of Games \_\_\_\_\_

***Longest Game--110 or more minutes.***

High Schools: \_\_\_\_\_ VS \_\_\_\_\_

District(s): \_\_\_\_\_ / \_\_\_\_\_ Date: \_\_\_\_\_ Total Minutes Played: \_\_\_\_\_

++Do not add time for the kicking of penalty kicks++

***Most Team Goals Scored In A Season- 80 or more.***

High School: \_\_\_\_\_ District \_\_\_\_\_  
Year(s) \_\_\_\_\_ # of Goals \_\_\_\_\_

***Most Team Shutouts In A Season- 15 or more.***

High School: \_\_\_\_\_ District \_\_\_\_\_  
Year(s) \_\_\_\_\_ # of Shutouts: \_\_\_\_\_

***Most Consecutive Team Shutouts—8 or more.***

High School: \_\_\_\_\_ District \_\_\_\_\_  
Year(s) \_\_\_\_\_ # of Consecutive Shutouts \_\_\_\_\_

***Undefeated/Untied Season(s)***

High School: \_\_\_\_\_ District \_\_\_\_\_

Year: \_\_\_\_\_ Team Record: \_\_\_\_\_

Year: \_\_\_\_\_ Team Record: \_\_\_\_\_

Year: \_\_\_\_\_ Team Record: \_\_\_\_\_

++This means all games played from the time you issue the uniform until you gather them at the conclusion of the season++

***Undefeated Season(s)***

High School: \_\_\_\_\_ District \_\_\_\_\_

Year: \_\_\_\_\_ Team Record: \_\_\_\_\_

Year: \_\_\_\_\_ Team Record: \_\_\_\_\_

Year: \_\_\_\_\_ Team Record: \_\_\_\_\_

***Team Goals Against Average For A Season***

High School: \_\_\_\_\_ District \_\_\_\_\_

Year(s) \_\_\_\_\_ Goals Allowed/Games Played: \_\_\_\_\_ / \_\_\_\_\_

Average (0.400 or less): \_\_\_\_\_

++Record goals allowed and games played for the season. Find the average by taking the total # of goals allowed by the team for the entire season and dividing that by the total # of games played during the entire season++

**INDIVIDUAL RECORD - OFFENSE**

***Most Goals Scored In A Season--30 or more.***

Name of Player: \_\_\_\_\_ Year: \_\_\_\_\_

High School: \_\_\_\_\_ District: \_\_\_\_\_ # of Goals: \_\_\_\_\_

***Most Goals Scored In A Career--70 or more.***

Name of Player: \_\_\_\_\_ Year(s) \_\_\_\_\_

High School: \_\_\_\_\_ District: \_\_\_\_\_ # of Career Goals: \_\_\_\_\_

***Most Assists In A Season--20 or more.***

Name of Player: \_\_\_\_\_ Year: \_\_\_\_\_

High School: \_\_\_\_\_ District: \_\_\_\_\_ # of Assists: \_\_\_\_\_

***Most Assists In A Career- -35 or more.***

Name of Player: \_\_\_\_\_ Year: \_\_\_\_\_

High School: \_\_\_\_\_ District: \_\_\_\_\_

# of Career Assists: \_\_\_\_\_

**INDIVIDUAL RECORDS--DEFENSE**

***Most Shutouts In A Season--12 or more.***

Name of Keeper: \_\_\_\_\_ Year: \_\_\_\_\_

High School: \_\_\_\_\_ District: \_\_\_\_\_

# of Shutouts: \_\_\_\_\_

++Keepers must play the entire match to be given credit for a shut out++

***Most Shutouts In A Career—25 or more.***

Name of Keeper: \_\_\_\_\_ Year(s): \_\_\_\_\_

High School: \_\_\_\_\_ District: \_\_\_\_\_

# of Career Shutouts: \_\_\_\_\_

***Consecutive Shutout--7 or more.***

Name of Keeper: \_\_\_\_\_ Year: \_\_ (s) \_\_\_\_\_

High School: \_\_\_\_\_ District: \_\_\_\_\_

# of Consecutive S.O: \_\_\_\_\_

***Goals Against Average For A Season***

Name of Keeper: \_\_\_\_\_ Year: \_\_\_\_\_

High School: \_\_\_\_\_ District: \_\_\_\_\_

Goals Allowed \_\_\_\_\_ Games Played: \_\_\_\_\_ Average (0.400 or Less) \_\_\_\_\_

++A keeper must play the entire game for that game to count. Record goals allowed and games played. Find the average by taking the total # of goals allowed by a keeper for a season and divide that by the total number of games the keeper played during that season++

***Most Saves In A Game--30 or more.***

Name of Keeper: \_\_\_\_\_ Year: \_\_\_\_\_

High School: \_\_\_\_\_ District: \_\_\_\_\_ # of Saves: \_\_\_\_\_

***Most Saves In A Season--200 or more.***

Name of Keeper: \_\_\_\_\_ Year: \_\_\_\_\_

High School: \_\_\_\_\_ District: \_\_\_\_\_ # of Saves: \_\_\_\_\_

***Most Saves In A Career--350 or more***

Name of Keeper: \_\_\_\_\_ Year(s): \_\_\_\_\_

High School: \_\_\_\_\_ District: \_\_\_\_\_

# of Career Saves: \_\_\_\_\_

**Coach signs and verifies below**

Name of Coach: (please print): \_\_\_\_\_

Signature of Coach: \_\_\_\_\_

High School Reporting: \_\_\_\_\_

High School Team Gender:( Circle One)                      Male or Female

Date: \_\_\_\_\_

# Soccer Districts Results

Please mail at the end of your District Tournament to:

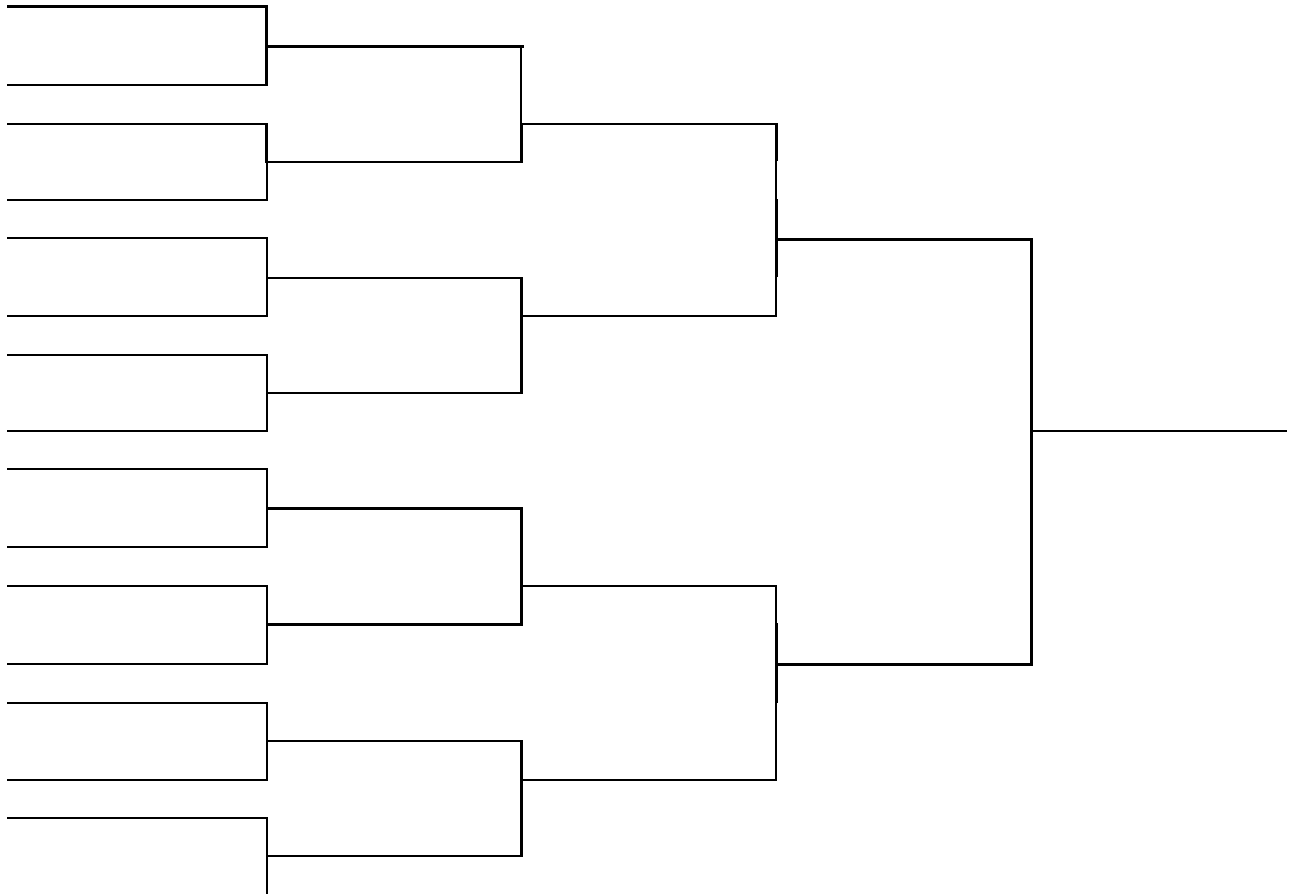
**Patrick Birns**  
**213 Westley Place**  
**Allentown, PA 18104**  
**birnsp@gmail.com**

**DISTRICT #** \_\_\_\_\_ **YEAR** \_\_\_\_\_

**PIAA CLASSIFICATION:** A AA AAA

**SEASON:** (SPRING FEMALE) (FALL MALE) (FALL FEMALE)

Dates:    /   /    Date:    /   /    Date:    /   /    Date:    /   /    Date:    /   /



**HIGH SCHOOL  
CAREER SOCCER RECORD**  
(100 WINS or MORE)

MAIL To:  
Patrick Birns; 213 Westley Place  
Allentown, PA 18104 birnsp@gmail.com

**TOTAL RECORD**

<u>HIGH SCHOOL</u>	<u>MALE or FEMALE</u>	<u>WINS / LOSS / TIES</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____
12.	_____	_____

# INDIVIDUAL COACH CAREER COACHING RECORD (100 WINS or MORE)

MAIL To:

Patrick Birns; 213 Westley Place  
Allentown, PA 18104 birnsp@gmail.com

\*Please list record at each school and indicate male or female next to school.

<u>COACHES FULL NAME</u>	<u>COACHED AT WHAT SCHOOL(S)</u>	<u>TOTAL RECORD WINS / LOSS /TIES</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____
12.	_____	_____