

Youngstown State University

Youngstown, Ohio 44555

Phone: 330-941-2385

Web Site: www.ysu.edu/sports

PROSPECTIVE ATHLETE QUESTIONNAIRE

I. Personal Data *(please type or print legibly)*

Name:			SSN:		
<i>(Last)</i>	<i>(First)</i>	<i>(M.I.)</i>			
Address:			Date of H.S. Graduation:		
City, State, Zip:			High School:		
Phone:			H.S. Address:		
Date of Birth:			Coach:		
Height:		Weight:	Grade Point Avg.		
E-mail address:					
Parent(s)/Guardian(s) Name(s):			SAT	ACT	
			Class Rank:		
Intended College Major:					

II. Athletic Participation: *Please indicate only your previous varsity competition along with the number of years.*

Baseball	Football	Swimming
Basketball	Golf	Diving
Cross Country	Soccer	Tennis
Track & Field	Softball	Volleyball
Other:		

Varsity Letter Winner in following sports:	No. of Years:
Other athletic awards or honors:	

III. ATHLETIC INFORMATION *Please list below all significant times, scores, pertinent statistics, and/or personal bests that you have achieved in the sport of interest specified above throughout your athletic participation. Be very specific.*

A.	Individual Record:
B.	Team Record:
C.	Personal Bests:
D.	Pertinent Statistics:
E.	Other:

Send this questionnaire and any attachments to:

Youngstown State University
Athletic Department
One University Plaza
Youngstown, OH 44555