

## **Student – Athlete Information Sheet**

Please fill out this sheet completely and return it to Drew Maus, Baseball Office, 1100 Henderson St. P.O. Box 7630, Arkadelphia, AR 71999. Baseball Office phone (870) 230 - 5071. Please enclose a copy of your regular season schedule, summer schedule, and transcripts.

I. Personal Information	Today's Date:
Name:	Soc. Sec. #: Date of Birth:
Position: Ht: Wt:	Bat: R L S Throw: R L
Home Phone: ()	Address:
Cell Phone: ()	City: State: Zip:
Player's email:	Parent's email:
Father's name:	Mother's name:
Father's occupation:	Mother's occupation:
Work phone: ()	Work phone: ()
Alma Mater:	Alma Mater:
Names, ages, and colleges of any brothers and/or sisters:	
Names, ages, and colleges of any brothers and/or sisters:  II. Academic Information	
Names, ages, and colleges of any brothers and/or sisters:  II. Academic Information  High School:	Other College:
Names, ages, and colleges of any brothers and/or sisters:  II. Academic Information  High School:  HS Graduation: Current Cum. GPA:  PSAT Score: Current Rank in Class:  SAT Information	Other College: Year in School:
Names, ages, and colleges of any brothers and/or sisters:  II. Academic Information  High School:  HS Graduation: Current Cum. GPA:  PSAT Score: Current Rank in Class:	Other College: Year in School: Were you an NCAA Qualifier after HS? Yes No
Names, ages, and colleges of any brothers and/or sisters:  II. Academic Information  High School:  HS Graduation: Current Cum. GPA:  PSAT Score: Current Rank in Class:  SAT Information  Date of Test Critical Read. Math Writing	Other College: Year in School: Were you an NCAA Qualifier after HS? Yes No Have you registered with NCAA Clearinghouse? Yes No
Names, ages, and colleges of any brothers and/or sisters:  II. Academic Information  High School:  HS Graduation: Current Cum. GPA:  PSAT Score: Current Rank in Class:  SAT Information  Date of Test Critical Read. Math Writing  1	Other College: Year in School: Were you an NCAA Qualifier after HS? Yes No Have you registered with NCAA Clearinghouse? Yes No Course hours completed:

III. Baseball Information		
HS Coach's Name:	Summer Team:	
Phone Number: [Home]: ( )	Summer Coach's Name:	
[School]: ()	Phone Number [Home]: ()	
[Cell]: ()	[Cell]: ()	
[Email]:	[Email]:	
List your strengths as a player:	List camps, tournaments, or showcases you have attended:	
1.	1.	
2	2	
3.	3.	
Name the three best undergraduate high school baseball players	in your area:	
Players Name Position	High School Year of Graduation	
1	1 Kill	
2	Y-	
3	1	
Professional Scouts who have evaluated you:	<b>↓</b>	
Professional Scouts Phone/E-Mail:	7	
IV. College Interests		
List your top three college choices (Include Henderson State University if it is one of your top three choices):		
1.		
2.		
3.	- {	
List the top (3) determining factors for you and your family in s	relecting a school (Please add additional comments):	
P	creeting a school (1 lease and additional comments).	
	b	
2	-	
3		
Describe anything about yourself you would want our Baseball staff to know (special circumstances, family situation, baseball		
connections, etc):		