

**ALVIN COMMUNITY COLLEGE
DOLPHIN SOFTBALL
STUDENT-ATHLETE QUESTIONNAIRE**

(Please type or print neatly)

General Information

NAME: _____ Mother's Name: _____
ADDRESS: _____ Occupation: _____
CITY: _____ STATE: _____ ZIP: _____ Work Phone: (____) _____
Phone: (____) _____ Father's Name: _____
E-Mail: _____ Occupation: _____
Date of Birth: _____ Age: _____ Work Phone: (____) _____
Social Security No: _____
Height: _____ Weight _____

Academic Information

High School: _____ Phone: (____) _____
Address: _____ City: _____ State: _____ Zip: _____
GPA: _____ RANK: _____ SAT: _____ ACT: _____
Graduation Date: _____ Intended College Major: _____
Registered in NCAA Clearinghouse: Yes No

Team Information

H. S. Coach _____ Phone: (____) _____
Position Played: _____
Summer Team: _____
Coach: _____ Phone: (____) _____
Position Played: _____

Statistics

Throws: [] Right [] Left Bats: [] Right [] Left [] Left Slap [] Left Drag
Speed: H - 1st _____ H - H _____ Batting Avg: _____ Fielding Avg: _____
Pitches: (types and speeds) _____
Pitching Coach: _____ Phone: (____) _____
Pitching record: _____ ERA: _____