



COUGAR ATHLETICS

Prospective Student Athlete Questionnaire



Complete & mail to: SCC Athletics Dept., CC104, 4601 Mid Rivers Mall Dr., Cottleville, MO 63376

Personal Information

Name _____ Nickname _____
 Address _____ City _____ State/ZIP _____
 Home Phone _____ Cell Phone _____ E-mail _____
 Father's Name _____ Mother's Name _____
 College _____ College _____
 Father's Phone _____ Mother's Phone _____
 E-mail _____ E-mail _____
 Father's Occupation _____ Mother's Occupation _____
 Living With (Circle One): Both / Mother / Father / Other: _____ Relationship _____
 Brothers and Sisters (Name/Age) _____

Softball Information

Primary Position _____ Secondary Position _____ Height _____ Weight _____
 Hit: *R L S* Throw: *R L* Fastball _____ mph Other Pitches _____
 Other sports lettered in _____
 School Coach _____ Phone _____
 Softball Web Site _____ School Web Site _____
 Summer Coach _____ Phone _____
 Summer Team Web Site _____
 Who are the best players you have played against (Name/School) _____

Academics

High School _____ Phone _____ Fax _____
 City _____ State/ZIP _____
 Counselor's Name _____ Counselor's Phone _____ Clearing House No. _____
 Graduation Date _____ GPA _____ ACT Composite _____ SAT (Date/Score) _____
 Academic Major/Interest _____ Do you think you may qualify for financial aid? _____

College Interest

Your interest in SCC (Circle One): *Top Choice Extremely Moderately None*
 Top colleges of interest to you: (List SCC if appropriate)
 1) _____ 2) _____ 3) _____
 List other colleges that have contacted you: _____

Other Information

Use this space to share anything else you'd like us to know about you.

Coach Recommendation

Coach _____ Team _____ Phone _____
 Please Rate Player as: 1) Pro prospect 2) Top Div. I 3) Mid Div. I 4) Div. II or JC 5) No prospect
 Additional Comments _____ Arm _____ Fielding _____ Hitting Avg. _____
 _____ Hit Power _____ Run _____
 _____ Pitching: Overall _____ Command _____ Fastball _____
 _____ Curve _____ Change _____