Delaware County Community College
Athletics Questionnaire for Prospective Student-Athletes

Thank you for your interest in the Intercollegiate Athletics Program Delaware County Community College! Please take some time to complete this questionnaire. When completed, this questionnaire will be sent directly to the coach of your sport-interest and he or she will respond to you as soon as possible.

This is not a formal application to Delaware County Community College. It is used solely to give our coaches some basic information about you.

DATE: ________________

SPORT: (CIRCLE ONE) BASEBALL – (M)BABEYALL – (W)BASKETBALL – GOLF – (M)SOCCER – (W)VOLLEYBALL – (W)TRACK

CONTACT INFORMATION

NAME: _________________________________________________________

ADDRESS 1: ______________________________________________________

ADDRESS 2: ______________________________________________________

CITY: _____________________________ STATE: _____ ZIP: _____________

PHONE: _______________________________

EMAIL: _______________________________

PERSONAL INFORMATION

DATE OF BIRTH: ________________

GENDER: _____

ACADEMIC INFORMATION

HIGH SCHOOL: _____________________________________________________

CLASS YEAR: ________________ GRADUATION YEAR: ________________

INTENDED COLLEGE MAJOR: _______________________________________

TERM YOU PLAN TO BEGIN COLLEGE: FALL OR SPRING

GPA: _____________

HIGH SCHOOL COACH: ____________________________________________

COACH’S NUMBER: ________________________________

OTHER ATHLETIC INFORMATION

SPORTS PLAYED IN HIGH SCHOOL: ______________________________________

NUMBER OF YEARS PLAYED: _____________

SPORT LEVEL PLAYED: VARISTY – JUNIOR VARSITY - FRESHMAN