

PROSPECTIVE STUDENT-ATHLETE QUESTIONNAIRE

If you are interested in competing in intercollegiate athletics for Haskell, please complete this form and submit it to the Department of Athletics. This form is NOT an official university application.

Today's Date _____ Sport(s) of Interest _____

PERSONAL INFORMATION

Name _____ Social Security Number _____

First Middle Last

Home Address _____

City, State, Zip Code _____ phone _____

Birthdate _____ E-Mail Address _____

Parents/Guardians

Father's Name _____ Telephone _____

Mother's Name _____ Telephone _____

Either Parent/Guardian an Alumnus of Haskell?(please Circle one): Yes No

ACADEMIC INFORMATION

High School/Prep School _____ Graduation Date _____

School Address _____

City, State, Zip Code _____

School Phone _____ School Fax _____

Guidance Counselor _____ Office Phone: _____

Grade Point Average _____ Class Rank _____ Out of _____

Test Scores: SAT _____ Verbal _____ Math _____ ACT _____

Anticipated Major(s) and/or Study Interests _____

ATHLETIC INFORMATION

Height _____ Weight _____ Uniform Number _____

Position/Event _____

High School/Prep School Coach _____

Coach's Office Phone _____ Coach's Home Phone _____

Last Year's Stats or Honors _____

Last Year's Team Accomplishments _____

AAU/Club Team/State Games Accomplishments _____

OTHER INFORMATION

Names of Haskell Alumni or Current Students you know _____

Comment on your interest in Haskell: I have applied _____ Date Application was sent _____

I would like an application sent to me _____ I am interested in visiting campus _____

What other schools are you looking at? _____

Additional Comments _____

Please Return by mail to: Department of Athletics, Haskell Indian Nations University, 155 Indian Ave, Box#4033, Lawrence, KS 66046 or by fax to: 785-832-6632