



Your dreams. Our mission.
Recruiting Questionnaire

Personal Information:

Name: _____
 Last First M.I. Nickname

Address: _____
 City State Zip

() () @
 Home Phone Cell Phone E-mail

Birth date SSN

Father's Name Occupation Business Phone
 Employer Alma Mater

Mother's Name Occupation Business Phone
 Employer Alma Mater

Parents are: () Married () Divorced () Separated I live with: () both () mother () father

Siblings: Names & Ages: _____

Family/Friends who have attended MBCC: _____

Academic Information:

School Address City State Zip

Guidance Counselor Phone E-mail H.S. Website

GPA: _____ Class Rank: _____ ACT: _____ Graduation Date: _____

SAT: Verbal _____ Math _____ SAT II: English _____ Math _____ PSAT: _____

Desired Course of Study: _____

Athletic Information:

Sport (s) of Interest: _____

Height: _____ Weight: _____ Position: _____ Strong Hand: R L Jersey #: _____

Honors Averages Greatest Moment in Sports

H.S. Coach Name Home# Work # Cell#

Club Team Name Coach Name Home# Cell#

By signing I am giving permission for an unofficial transcript to be sent to MassBay Community College from the Guidance Department upon request.

Parent's Signature: _____ Student's Signature: _____ Date: _____

MAIL TO: MassBay Community College Athletics * 50 Oakland Street * Wellesley Hills, MA 02481 * (p) 781-239-2669 * (f) 781-239-2669