



Jacksonville Basketball Questionnaire

PERSONAL INFORMATION

Name: _____
(First) (Middle) (Last)

Home Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ Nickname: _____

Cell Phone: () _____ Home Phone: () _____

Email Address: _____ Facebook: Y N Twitter: @ _____

Mother's Name: _____ Father's Name: _____

Mother's Occupation: _____ Father's Occupation: _____

Mother's Phone: () _____ Father's Phone: () _____

Parent(s)/Guardian(s) Email Address: _____

Brother(s) or Sister(s) Names/Ages: _____

ACADEMIC INFORMATION

High School: _____ Graduation Year: _____ Guidance Counselor: _____

School Address: _____

City: _____ State: _____ Zip: _____

School Phone: () _____ Counselor Phone: () _____

SAT Score: Verbal _____ Math: _____ or ACT: _____ GPA: _____ Date of Next Test: _____

Desired Major: _____ School Web Address: _____

Class Rank: _____ out of _____ NCAA Eligibility: YES or NO ID#: _____

I authorize my transcript to be released to JU (signature): _____

ATHLETIC INFORMATION

Height: _____ Weight: _____ Position: _____ Uniform#: _____ R/L Hand: _____

PPG: _____ RPG: _____ APG: _____ Steals: _____ FT% _____ FG% _____ 3FG% _____

High School Coach: _____ Email Address: _____

Office Phone: () _____ Cell Phone: () _____ Home Phone: () _____

AAU Team: _____ AAU Coach: _____ Email Address: _____

Office Phone: () _____ Cell Phone: () _____ Home Phone: () _____

Friends & Family who have attended Jacksonville University: _____

List the three outstanding opponents you will play against this year: _____