



MIAMI UNIVERSITY Synchronized Skating Questionnaire



PERSONAL DATA

Name (Last) (First) (Middle)

Birthdate Social Security #

Home Address

Housing/Billet Address

City/State/Zip

City/State/Zip

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Phone

Cell Phone

E-mail Address

FAMILY DATA

Father's Name

Mother's Name

Address

Address

City/State/Zip

City/State/Zip

Occupation

Occupation

Employer

Employer

() ()

() ()

Home Phone Work Phone

Home Phone Work Phone

Alma Mater

Alma Mater

Brother's Name & Ages: _____

Sister's Names & Ages: _____

ACADEMIC INFORMATION

High School

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Phone

Address

School Size

City/State/Zip

Graduation Date

1) _____

2) _____

ACADEMIC MAJOR TO BE STUDIED IN COLLEGE (LIST TOP 2 CHOICES)

TEST RESULTS/GRADE POINT AVERAGE/HIGH SCHOOL RANKING	
ACT _____	GPA _____
SAT (verbal) _____	(Math) _____
P.S.A.T. (verbal) _____	(Math) _____
H.S.R. (percentile) _____	Academic Advisor _____

ATHLETIC INFORMATION

Current Team_____

Head Coach_____ Phone_____

Level of Team_____

Coach's Address_____

Height_____ Weight_____

City/State/Zip Code_____

Other Teams Skated On_____

HIGHEST REGISTERED TEST PASSED

USFSA Moves In The Field_____

ISI Freestyle_____

USFSA Dance_____

ISI Figures_____

USFSA Freestyle_____

USFSA Figures_____

Personal Athletic Goals:_____

COMPETITION RECORD (Team and/or Individual)

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

OUTSTANDING AWARDS/ACHIEVEMENTS

OTHER UNIVERSITIES YOU ARE CONSIDERING (Rank in order of preference)

- 1) _____
Why?_____
- 2) _____
Why?_____
- 3) _____
Why?_____
- 4) _____
Why?_____

Return to: Vicki Korn
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