



***Southern Sports Academy
Student Athlete Information***

A non-refundable application fee of \$35.00 is required to process this form. A link to allow online payment processing will be sent to your email after receiving this form.

Student Athlete name _____

Home Address _____

Date of Birth _____

Home phone # _____

Cell phone # _____

Email Address _____

Last High School attended _____

Date of Graduation _____

Football coach's name _____

Coach's phone # _____

Have you ever been dismissed academically? YES or NO

Have you ever been dismissed for disciplinary reasons? YES or NO

Have you used alcohol, tobacco, or non-medical drugs during the past 12 months? YES or NO

How did you hear about us? _____

Do you have any medical conditions? If Yes, explain

Please indicate below if you have taken any of the following tests:

SAT Y or N If yes, score _____

ACT Y or N If yes, score _____

GPA _____

What was your latest 40-yd dash time? _____

What position do you play? _____

Height: _____ Weight: _____

Bench Press _____ Squat _____

Have or are you applying for financial aid? Y or N If yes, please indicate when, and what type of aid, and have you received approval?

Are you currently passing your high school courses now? If not, why? What are you failing?

Will you be lacking any core courses after graduation? _____

Have you taken 2 years or are you taking your 2nd year of a foreign language (2 yrs of the same language)?

What college/university are you interested in attending after leaving SSA ?

Have you been contacted by any colleges? If so please provide names of colleges and coaches.

What are your career goals? _____

Mothers Name/Occupation _____

Email Address _____

Fathers Name/Occupation _____

Email Address _____

Address if different from above _____

Home Phone# _____

Cell Phone# _____

Emergency contact _____

Home phone # _____

Cell phone # _____

Alternate # _____

Student Athlete Sign _____

Parent/guardian Sign _____

Date _____

Comments: _____