GPSA Football Questionnaire

Name:_____
First Middle Last

Address:_____
Street City State Zip

Date of Birth:__/_____/____Home Phone:(____)_____Cell Phone (____)_____

High School_____ School Phone: (_____)_____

Address:_____
Street City State Zip
Coach:_____ Phone: (_____)_____

Height:_____ Weight:_____ 40 Time:_____

Offensive Position:_____ Defensive Position:_____

Specialties: Punt:_____ FG & PAT:_____ Kick Off:_____ Long Snap_____

Jersey Number::_____ Dark:_____ Light:_____

Do you start?___ At which positions?-____All league?___ All state?___ All American?_____

GPA:_____ Rank:_____ SAT: Reading:_____

Math:_____ Writing_____

Possible College Major(s):_____

Other Sports:_____

Fathers Name:_____ College Attended:_____

Fathers Occupation:_____ Business Phone: (____)_____

Mothers Name:_____ College Attended:_____

Mothers Occupation:_____ Business Phone: (_____)_____

Parents Are: Married:_____ Divorced:_____ Separated:_____

I Live With: Both:_____ Mother:_____ Father:_____

Who is recruiting you now ?_____

Who has offered you ?_____

Colleges in which you are interested: (1)_____ (2)_____

(3)_____ (4)_____

How did you hear about Georgia Prep Sports Academy?_____

RETURN TO: Georgia Prep Sports Academy Inc.1072 West Peachtree Street West Peachtree Street NW Atlanta Georgia 30357