



PROGRAM APPLICATION

Please type or print legibly

Full Name _____ Date of Birth _____

Current Mailing Address _____

City

State

Zip

Phone _____ E-mail _____

High School Name: _____ Graduation Year _____

Parent or guardian _____ Phone _____

Email: _____

Address: _____

Parent or guardian _____ Phone _____

Email: _____

Address: _____

Athletic Information

Primary Position _____ Secondary Position _____

Throw: ___ Left ___ Right Bat: ___ Left ___ Right ___ Switch

Hat Size: ___ S/M (6 7/8 - 7 5/8) ___ L/XL (7 1/8 - 7 7/8) Shirts: S M L XL

Educational Data:

GPA _____ ACT/SAT: Reading _____ Math _____ Writing _____

Major of interest: _____

Preferably College/University 1: _____ 2: _____

3: _____ 4: _____

APPLICANT PERSONAL STATEMENT

Please complete the following questions with an honest evaluation of yourself and return with this application. **Type on a separate sheet of paper.** Please limit total response to 1000 words or less.

1. What is/are your primary career goal(s)?
2. What in your life had mostly influenced your decision of becoming a Student-Athlete?
3. Describe your ATTRIBUTES that you feel are clearly related to the profession you want to intend.
4. Why you should be admitted into College / University?

Signature _____

Date _____

For more information on the Program visit our website at: homefieldhunterflorida.com