

STONY BROOK SEAWOLVES

Women's Volleyball

Prospective Student-Athlete Form

Name _____ Soc. Sec# _____ Yr. of Grad _____
Phone# (H) _____ (Cell) _____ Position _____ D.O.B _____
E-mail _____ Height _____ Weight _____

Address _____
City _____ State _____ Zip _____ High School _____

PSAT score (M) _____ (V) _____ SAT score (M) _____ (V) _____ ACT score _____
List the Schools you are highly interested in? _____

List of Schools who are recruiting you? _____
Intended Major _____

Jr. Club Team _____ Club Coach _____ Phone # (H) _____ (W) _____
Standing Reach _____ Standing Jump _____ Approach Jump _____ Shoe Size _____

High School Phone# _____ H.S. Guidance Counselor Phone# _____
High School Coach _____ Phone # (W) _____ (H) _____

Are you registered with the NCAA Clearing House? Yes ___ No ___ Clearing House # _____

Mother's Name _____ Occupation _____ Phone# (C) _____
Father's Name _____ Occupation _____ Phone# (C) _____

Will you be eligible for Aid? Yes _____ No _____ H.S. G.P.A. _____ Rank _____

Age first started playing Club: _____ Are you a starter? _____ Jersey # _____

Volleyball Experience (Camps attended, honors/awards, other sports played)

How interested are you in the University at Stony Brook?

Extremely Interested Have you visited campus Have you applied to SB
 Interested, want to learn more Would you like to visit the campus Will apply, send application

Please return to: **Deborah Matejka-DesLauriers**

Women's Volleyball Coach

SBU Indoor Sports Complex –Volleyball Office

Stony Brook, NY 11794-3500

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