

Mike Shanks
Head Coach
509.777.3726
mshanks@whitworth.edu

MEN'S TENNIS ATHLETICS QUESTIONNAIRE



GENERAL INFORMATION

Name: _____
Last First Middle

Address: _____
Number & Street City State ZIP

Phone number: (____) _____ Birthdate: ____/____/____

Athlete's e-mail address: _____

Other sports you wish to participate in at the university level: _____

ACADEMIC INFORMATION

High school: _____
Name City State ZIP

High-school graduation date: ____/____/____ SAT/ACT score: _____ High-school GPA: _____
Month Year

College/university attended: _____

College/university GPA: _____ Received A.A. degree? _____

Possible major: _____

ATHLETIC INFORMATION

H.S. coach's name: _____ H.S. coach's e-mail address: _____

Work phone: (____) _____ Home phone: (____) _____

Coach's name: _____ Years acquainted: _____

Address: _____

Phone number: (____) _____ Coach's expertise: High Moderate Low TM

Coach's e-mail address: _____ Are videotapes available? Yes No

Position on team: _____ Personal record: _____ State qualifier? Yes No

Team record: _____

Post-season results: _____

Other schools that have contacted you: _____

Other sports participated in: _____

OTHER INFORMATION

Father's name: _____ Occupation: _____

Mother's name: _____ Occupation: _____

List any friends or family who have attended Whitworth, and your relationship to them: _____

Other information you would like us to have: _____

Interest level in Whitworth: High Medium Low

