



northeast

MISSISSIPPI COMMUNITY COLLEGE
Baseball Questionnaire



Name _____ Soc. Sec. # _____

Address _____

City/State _____ birth date _____

Telephone () _____ Cell phone () _____

Email Address _____ height _____ weight _____

Father's name _____ Occupation _____ work # _____

Mother's name _____ Occupation _____ work # _____

High School _____ Graduation year _____

Counselor's name _____ Telephone () _____

ACT score _____ SAT score _____ Class Rank _____ Approx. GPA _____

School Honors _____

Coach's Name _____ Telephone () _____

Athletic Honors _____

Athletic injuries _____

Primary Position _____ Secondary Position _____ Home-to-First time _____

Throws: R / L Bats: R / L Both

Summer Team _____ Primary Position _____ Secondary _____

Summer Coach's Name _____ Phone () _____

Best Player You've Faced _____ Team _____

Planned Major _____

MAILING ADDRESS:

Attn: Northeast Miss. Community College, Box 1350
101 Cunningham Boulevard * Booneville, MS 38829 * Office: (662) 720-7309
Email: wkfarris@nemcc.edu * Fax: (662) 720-7405 * Cell Phone: (662) 574-8555

WEBSITE: www.nemcc.edu

PHYSICAL ADDRESS:

Cunningham Boulevard * Estes Hall * Booneville, MS 38829