

MOTLOW STATE COMMUNITY COLLEGE

BASEBALL

PO Box 8500, Lynchburg, TN 37352 • Phone: 931.393.1615 • Fax: 931.393.1999

PERSONAL INFORMATION	N						
Full Name:			Preferred Name:				
Address:			City:		State: Zip:		
Home Phone:		Cell Phone:					
Email:		Facebook Email:					
Date of Birth:	Hobbies:						
FAMILY/GUARDIAN INF	ORMATION						
Name:		Relationship:					
Phone:		Email:					
Employer:		Occupation:					
Name:		Relationship:					
Phone:		Email:					
Employer:		Occupation:					
Siblings:							
ACADEMIC INFORMATION	N						
gh School Name: HS Mascot:							
High School Address:		HS Phone:					
Guidance Counselor Name:	•			Email:			
Graduation Year:	GPA:	Class Rank:	AC	T Score:	SAT Score:		
Intended College Major:			2r	nd Major Choice:_			
School Involvement/Organ	izations/Academ	ic Awards:					
ATHLETIC INFORMATION	 N						
		/ no NCAA Clearin	ahouse #:				
Registered with NCAA Clearinghouse? yes / no NCAA Clearinghouse #:							
	n: Cell Phone:						
Athletic Awards/Honors: _							
BASEBALL INFORMATIO				I I a Carlada	AA/=:=U		
	Throws: Position 2:						
Batting Average:							
Pitchers - Earned Run Aver	aye (EKA):	VVIII/ LOSS RE	ecord:	Strike-outs:_	vvaiks:		
Additional Statistics:							



