

College of the Siskiyous

800 College Ave. Weed, Ca 96094



I. PERSONAL INFORMATION

Name: _____ Date of Birth: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (_____) _____ Email: _____

Father: _____ Mother: _____

You are living with (circle one): Both Mother Father Other: _____

II. ACADEMIC INFORMATION

High School: _____ School Phone: (_____) _____

GPA: _____ Class Size: _____ (Test Scores if possible) SAT: _____ ACT: _____

College Major: _____ Academic Interests: _____

III. FOOTBALL INFORMATION

Your Position: Offense: _____ Defense: _____ Special Teams: _____ Jersey #: _____

Height: _____ Weight: _____ 40yd: _____ Bench: _____ Squat: _____ Clean: _____

Football Awards / Statistics: _____

Coach's Name: _____ Phone: (_____) _____ School Colors: _____

Other colleges recruiting you: _____



NO POSTAGE
NECESSARY
IF MAILED IN THE
UNITED STATES

BUSINESS REPLY MAIL
FIRST CLASS PERMIT #108 WEED CA

POSTAGE WILL BE PAID BY ADDRESSEE

**COLLEGE OF THE SISKIYOU
ATTN: ERIC YOUNG HEAD FOOTBALL COACH
800 COLLEGE AVE
WEED, CA 96094**