

Swimming Questionnaire

Personal Information

Name _____ Phone () _____ Cell Phone() _____
 Home Address _____ City _____ State _____ Zip _____
 Date of Birth _____ Height _____ Weight _____ S.S.# _____
 E-mail Address: _____
 Parent or Guardian _____ Occupation _____

Academic Information

School _____ Phone () _____
 Address _____ City _____ State _____ Zip _____
 Coach's Name _____ Phone() _____
 Counselor's Name _____ Phone() _____
 Rank in Class _____ GPA _____
 ACT Score _____ Taken _____ SAT Score _____ Taken _____
 Preferred Course of Study _____ Date of Graduation _____
 Club Team Name _____ Coach _____ Phone() _____

Other universities you are considering:

1.	2.
3.	4.
5.	6.

Athletic Information

Best Times to Date: (Include relay splits)

Freestyle	50	100	200
	500	1000	1650
Backstroke	50	100	200
Breaststroke	50	100	200
Butterfly	50	100	200
Ind. Medley	100	200	400

When did you begin competitive swimming?	Have any of your relatives attended Xavier?
Have you applied to Xavier?	Are you considering signing early?

Please give a brief description of accomplishments (both individual and team) on the back.

*If available send a complete resume	*Enclose a copy of your swimming schedule
*If available please send a photograph	*Enclose a copy of your transcript and test scores

Return to: Steve Riegler, Head Swimming Coach, Xavier University,
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