

Nevada Track Stats

Athlete Information

*Attach separate sheet if necessary
When complete, fax to NTS at 966-5005*

Full Name		M / F	Coach Name	
School Attending		Class Year	Coach Phone #	
GPA	Verified By:		SAT / ACT Score	Verified By:

Personal Records / State Marks Track & XC

Event	Mark / Time	Location / Date
State Performance / Place	Mark / Time	Date

College Direction / Community Service

Please List any Community Service Work / Awards / Commendations _____ _____ _____ _____	Tell us about yourself, collegiate goals, intended course of study, personal goals: _____ _____ _____ _____
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Certification and Authorization

The purpose of publishing this information is to generate interest from colleges and potential scholarship sources. I hereby hold harmless and authorize Nevada Track Stats to publish photographs and/or the attached information on www.nvtrackstats.com. I certify that the information supplied is true and correct to the best of my knowledge.

Athlete: _____ Parent/Guardian: _____

Instructions to Coaches: Please verify PR's, GPA and SAT/ACT scores prior to forwarding to NVTs. Coaches will be the contact person for any collegiate inquiry and will be responsible for forwarding any inquiry to the athlete.

Verified/Coach Sign: _____ Phone #: _____

Print Name: _____