



AMERICAN
UNIVERSITY
WASHINGTON, D.C.

Name: _____ Sex: Male / Female Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ Best time to call: _____

Email: _____ SS#: _____

Age: _____ Birthdate: _____ Height: _____ Weight: _____

Mother's Name/Occupation: _____

Father's Name/Occupation: _____

Siblings/Names and Ages: _____

Friends or Relatives that have Attended AU: _____

Hobbies/Interests: _____

What four adjectives describe you best: _____

Why are you interested in attending American? _____

Do you have a specific area of academic interest? _____

What other schools are you considering? _____

What is the best date for you to visit American? _____

Other information you would like us to know: _____

Do you need an American University Application for Admission? _____

Are you applying for Financial Aid? ____ If yes, do you need Financial Aid Forms ____

Academic Information:

High School now attending: _____

High School Address: _____

City: _____ State: _____ Zip: _____

Graduation Date: _____ GPA: _____ Class Rank: ____ of ____

Test Scores: SAT M _____ V _____ Date Taken: _____

ACT (Composite) _____ Date Taken: _____

AP Classes Taken: _____

Academic Awards/Honors: _____



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Athletic Information:

Name of USS/YMCA Team: _____ Coach: _____

Office Phone: _____ Home Phone: _____

High School Team Coach: _____ Work Phone: _____

Number of Years you have trained competitively: _____

Number of Years you have trained year round: _____

Athletic Honors/Awards: _____

Times:

(Please submit best times and dates for all events swam within the past two years)

50 Free: _____ 100 Back: _____

100 Free: _____ 200 Back: _____

200 Free: _____ 100 Breast: _____

500 Free: _____ 200 Breast: _____

1000 Free: _____ 100 Fly: _____

1650 Free: _____ 200 Fly: _____

200 IM: _____ 400 IM: _____

Please Return to:

Mark Davin
Head Swim Coach
American University
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Washington D.C.

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