



Student-Athlete Profile/Application

Student-Athlete Information

First Name: _____ Last Name: _____ Date of Birth: _____
(mm/dd/yyyy)

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

Height: _____ Feet _____ Inches Weight: _____ lbs

Graduating Class of: _____ Current School: _____

Home Phone: _____ Cell Phone: _____ E-Mail: _____

Position Played: _____ Home Town: _____
(City, State, County)

GPA: _____ (0.0) SAT: _____ ACT: _____ (If answer is none type "none")

School Preference: _____

Scholarship Offers: _____

Parent/Guardian Information

(Please check the appropriate box(es) to indicate with whom you live at the home address given above.)

Parent or Guardian 1

Parent 2

Guardian 2

	Parent or Guardian 1	Parent 2	Guardian 2
Name:	_____	_____	_____
Home Phone:	_____	_____	_____
Cell Phone:	_____	_____	_____
E-Mail Address:	_____	_____	_____

I-Can Youth Foundation

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