

HOME OF QUICKSILVER SSJSB • P.O. Box 18124 • San Jose, CA 95136

Applicant Name:	Date of Birth:	_ SSI #:
Address:		Phone:
High School Attending:	College Applying To:	
Date of Graduation:	GPA:	
What is your history with South San Jose SoftBall?		
Describe your high school extra-curricular activities a		
List any honors and/or recognition you have received		
What has been your greatest contribution to your hig	h school and community?	
Briefly describe your academic objectives:		
Signature	Date	