

REQUEST FOR DETERMINATION OF FACTS RELATED TO THE CERTIFICATION OF A PROSPECTIVE STUDENT-ATHLETE'S AMATEUR STATUS

This form must be completed before the NCAA Division I Amateurism Fact-Finding Committee or NCAA Division II Amateurism Fact-Finding Group will process the request. The committee/group will only consider a request for determination of facts submitted by a member institution. In addition to the information included in the form, it is the responsibility of the institution to submit any information that it believes is relevant to the consideration of the request at the time the form is submitted. The committee/group may also request additional pertinent information prior to the final consideration of the case. Please review the Amateurism Fact-Finding Committee/Group Policies and Procedures Manual prior to submitting this form.

Email completed requests to Steve Clar (sclar@ncaa.org) in academic and membership affairs. **Typed requests are preferred.**

Please type or print.

1.	Applicant institution: Conference:
	Sport(s): Division:
2.	Prospective student-athlete's name:
	Prospective student-athlete's date of birth:
	SSN/Eligibility Center identification number:
3.	Prospective student-athlete's status.
	Date of high school graduation:
	Date of initial-collegiate enrollment:
	Date of initial-collegiate enrollment at your institution (if different):
4.	Was the prospective student-athlete recruited by your institution? YES: NO: (See NCAA Division I Bylaw 13.02.12.1 or NCAA Division II Bylaw 13.02.9.1)
	When did recruitment by your institution begin (mm/yyyy)?
	When did the prospective student-athlete become aware of initial-eligibility requirements (mm/yyyy)?
	Date of official visit to your institution (mm/yyyy):
	Date of signing the National Letter of Intent or written offer of admission (mm/dd/yyyy):

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		(e.g., high school, prepara		
es of Attendance	Institution(s)	Graduated (Yes or No)		
ach list of additional institutions if necessary) Date NCAA amateurism-certification staff provided written statement of determination of fac prospective student-athlete (mm/dd/yyyy):				
Describe the facts as understood by the institution with an explanation of the reasons for agreeing with the amateurism-certification staff's determination of facts:				
	ch list of additional Date NCAA am prospective stud	ch list of additional institutions if necessary) Date NCAA amateurism-certification staff provided written staten prospective student-athlete (mm/dd/yyyy): Describe the facts as understood by the institution with an exp		

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10.	Verification.				
	The undersigned understands that it is a violation of Bylaw 10.1 to knowingly furnish misleading information.				
	THE SIGNATURES OF THE FOLLOWING WAIVER REQUESTS:	INDIVIDUALS ARE REQUIRED FOR <u>ALL</u>			
	OR				
	Director of Athletics	Senior Woman Administrator			
	AND				
	OP				
	Faculty Athletics Representative	Chancellor/President			
<u>Instit</u>	tutional Contact Person (to whom all corresponden	ce regarding this request will be directed):			
Name	e of contact (please print):				
Title	of contact (please print):				
Telep	phone number:				
Fax n	number:				
F_ma	il address:				

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To be Completed by Prospective Student-Athlete:	
Buckley Statement. I give my consent to disclose to authorized re athletics conference (if any) and the NCAA any documents or infeligibility.	
Additionally, I give my consent to the NCAA to disclose my information from my education records to a third party (including necessary to explain the NCAA's position regarding this request wit violation of my rights under the Family Educational Rights and Privacy	but not limited to the media) as hout such disclosure constituting a
Signature (prospective student-athlete):	Date:

Prospective student-athlete's address: _____

Parent or Legal Guardian Signature: ______ Date: _____

(Required if prospective student-athlete is under 18 years of age)