

Athlete Eligibility Verification (Transfer Students)

form40.30.3.3.1.3 2022-2023

Date:								
То:	'							
School:								
Fax:			Telephone:					
E-Mail:								
Thechecks the eligibility record of all students who transfer to our university from another post-secondary institution. This information assists us in determining the number of seasons (years) of athletic participation a student is entitled to and the date the athlete is able to begin competing at our institution. Your assistance in providing this information is greatly appreciated.								
Athlete's Name & Sport:								
U SPORTS ID:								

Please provide the information below regarding a former student-athlete from your institution. Please confirm the eligibility and years that eligibility was used and return as soon as possible.

SECTION 1 – To Be Completed by All Institutions:								
1) Please indicate the years th	nis student attended your institution:							
2) Did the student-athlete trans If yes, at which post-second	sfer from a previous post-secondary i	institution? YES NO						
3) Participation in your athletic	program:							
Sport	Academic Year of Participation (September through August)	Was the athlete charged with a Year of Eligibility, or Assessed a Season of Competition? (yes / no)						
e.g.) basketball	2019-2020	yes						
Date of last contest in which game or competition roster								
,	er hours did the student-athlete succenic year that they were a student-athleough August)?	•						
6) What was the academic average for the student-athlete in the last academic year eligibility was consumed at your school (September through August)? (e.g., 75%)								
,	le to continue to compete in future aca iction's rules (inclusive of an added C	•						
YES, number of eligibility	y years remaining (inclusive of COVID	O waiver year, if applicable):						
	does not have any years of eligibility n for competition. Please explain:	remaining and is therefore not eligible						
8) Other information that migh	t be relevant (such as suspension / di	iscipline or doping infractions)?						

SECTION 2 – To Be Completed by Non-U SPORTS Institutions Only:

*NOTE: This section is specific to the 2020-21 season and is to be completed by the institution where the student-athlete was enrolled for that Academic Year.

If the student-athlete was not an athlete at any institution in 2020-21, then this section does not apply.

2020-2021 Academic Year								
1)	For the 2020-2021 Academic Year, did your instit season of competition in the associated sport of this	YES	□NO					
2)	In a traditional season that was not interrupted by 0 student-athlete have been charged with a year of e a season of competition based on their participation Academic Year? (i.e., did they cross traditional elig	YES	□NO					
3)	For the 2020-2021 Academic Year, was the stude a year of eligibility, or assessed a season of compe (i.e., if the student-athlete exceeded traditional elig you self-applied a COVID waiver, please indicate Year.	YES	□NO					
4)	Did your institution / jurisdiction provide the stude self-applied COVID waiver for their 2020-2021 e them an additional year of participation within yo	YES	□NO					
I hereby certify that the above information is complete and accurate (please sign): Athletic Director or Designate name Position / Title								
	Athletic Director or Designate name							
	Athletic Director or Designate signature	Date						
	Name of Institution	Jurisdiction (ie: U SPORTS, NCAA, N	NAIA, etc.)					