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Division II

ABC UNIVERSITY
NEW STUDENT-ATHLETE INFORMATION FORM
201_-1_ ACADEMIC YEAR

Name: _____ Date: _____

Sport: _____ **Student ID/Social Sec Number:** _____ **Date of birth:** _____

Gender: _____ **International student: (circle one)** YES NO

Ethnicity: (circle one) Alaskan/American Indian Asian/Pacific Islander Black Hispanic White Nonresident Alien

Other (please describe): _____

Housing: (circle one) On campus Off campus **Drivers license number:** _____ **State:** _____

Date entered ABC University (part time or full time): _____ **Date entered any institution (part time or full time):** _____

Local phone: () _____ **Permanent phone: ()** _____ **Cell phone: ()** _____

E-mail address: _____

Local address: _____

Permanent address: _____

City: _____ **State:** _____ **Zip:** _____

PARENT/LEGAL GUARDIAN INFORMATION

1. Parent(s)/Legal Guardian(s) Names(s): _____ **Relationship(s):** _____

Home phone: () _____ **Work phone: ()** _____ **Other phone: ()** _____

Address: _____ **E-mail:** _____

If different from student-athlete's permanent address



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2. Parent(s)/Legal Guardian(s) Names(s): _____ Relationship(s): _____

Home phone: () _____ Work phone: () _____ Other phone: () _____

Address: _____ E-mail: _____
If different from student-athlete's permanent address

INSURANCE

What health insurance policies is the student-athlete covered under (circle one): Personal Parents Guardian None

HIGH SCHOOL/PREPATORY SCHOOL INFORMATION

Name of high school	Location	Graduation date (m/yr)
_____	_____	_____
_____	_____	_____
_____	_____	_____

RECRUITMENT STATUS (circle answers)

1. Did a member of the athletics staff or anyone representing ABC University provide transportation for you to visit the campus? YES NO If yes, who provided the transportation? _____
2. Did you make an "official visit" to ABC University, at the expense of the athletics department? YES NO
3. Did anyone from the ABC University athletics department initiate or arrange a telephone contact, on more than one occasion, with you or a member of your family for the purpose of encouraging you to attend ABC University and participate in athletics? YES NO
4. Did anyone from the athletics department at ABC University visit you in your home, at your high school or any other place for the purpose of encouraging you to attend ABC University and participate in athletics? YES NO
5. Did you sign a National Letter of Intent (NLI) or written offer of athletics aid to attend ABC University and participate in athletics? YES NO

PREVIOUS COLLEGE ATTENDANCE INFORMATION

Name of Institution	Two-Year/Four-Year College	Dates Attended	FT/PT	Graduate Y/N
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



1. Did you practice at any institution listed above? YES NO

If yes, which institution? _____

What sport? _____ What semesters/quarters (e.g., F10, S11): _____

2. Did you compete in varsity intercollegiate athletics at any institution listed above? YES NO

If yes, which institutions? _____

What sport? _____ What semesters/quarters (e.g., F10, S11): _____

What sport? _____ What semesters/quarters (e.g., F10, S11): _____

What sport? _____ What semesters/quarters: (e.g., F10, S11): _____

3. Did you sign a National Letter of Intent (NLI) to attend any of the above institutions? YES NO

If yes, which institution? _____ What sport? _____

4. Did you receive athletically related financial aid at any of the above institutions? YES NO

If yes, which institution? _____ What sport? _____

If yes, how many years did you receive athletically related aid? _____

What semesters/quarters (e.g., F10, S11): _____

5. Did you participate on any club teams while you were enrolled at any of the above listed institutions?

If yes, which institution? _____ What sport? _____

What semesters/quarters (e.g., F10, S11): _____

Did the institution sponsor the same sport at the varsity level? YES NO

ELIGIBILITY

Since graduation from high school, have you ever competed in organized athletics competition, either as an individual or as a member of a team, that was not one of the college or university teams listed earlier? YES NO

Time Lapse Statement: If you have not continuously attended college as a full-time student each semester or quarter since your graduation from high school, please describe your activities during the period you were not in school (i.e., work, military service, church mission) and the exact time period.

Dates: _____ Reason: _____

Dates: _____ Reason: _____

Dates: _____ Reason: _____



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Dates: _____ Reason: _____

AMATEURISM

1. Have you ever accepted a loan, payment of expenses (e.g., travel, lodging, meals) and/or agreed orally or in writing to be represented by an agent/professional sports organization? YES NO
2. Has anyone (other than your immediate or extended family) given you cash or gifts of value since agreeing to participate in ABC University athletics program? YES NO
3. Have you ever wagered a bet on a college or professional athletics contest(s)? YES NO

EMPLOYMENT INFORMATION

Do you plan to work in the 201_-1_ academic year? YES NO

Name of employer: _____ Dates of employment: _____

City/State: _____ Job title: _____

Job duties: _____

Salary: _____ How did you obtain this job? _____

Did anyone connected with ABC University athletics help you get this job? YES NO

If yes, who was it? _____

What did they do? _____

My employment falls in the following categories: Work-study Intern University Commercial Self

CAR REGISTRATION

Will you have use of a vehicle on- or off-campus this year? YES NO

If yes, please fill in: Year: _____ Make: _____ Model: _____

License plate number: _____ State: _____

Person(s) the car is registered to: _____

Did you purchase an ABC University parking permit: (circle one) YES NO



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I understand the ABC University athletics compliance office will verify this car registration information through the university police department. By initialing here I consent and give my permission for this information to be disclosed to the compliance office by the university police during this academic year, 201_-1_.

Student-athlete's initials: _____ Date: _____

I certify that I have not received special discounts or financing while purchasing my personal vehicle due to my association with the athletics department.

Student-athlete's initials: _____ Date: _____

I _____ authorize ABC University to use my name or picture to generally promote ABC University athletics events, activities or programs.

Student-athlete's signature: _____ Date: _____

FINANCIAL AID

Any financial aid awarded from agencies outside of ABC University and your immediate family MUST be reported to the financial aid office. Please list any such awards, the awarding agency and the amount below:

I certify that my answers are complete and correct. I understand that ANY FALSE OR INCOMPLETE STATEMENTS IN THIS HISTORICAL FORM/REPORT MAY MAKE ME INELIGIBLE FOR INTERCOLLEGIATE ATHLETICS COMPETITION and/or any athletically related financial aid at ABC University. If any of the information I have supplied in this report changes during the year, I agree to notify the compliance office as soon as possible.

Student-athlete's signature: _____ Date: _____

DISCLAIMER: The information contained in this document is provided as a reference to member institutions and does not constitute binding advice on compliance with NCAA rules and bylaws. Any inquiries related to NCAA rules and bylaws should be directed to the NCAA academic and membership affairs staff. The most up to date information regarding NCAA Division II rules, bylaws and procedures can be found by accessing the information on LSDBi.