



## Student Matriculation Letter

Student-Athlete Name: \_\_\_\_\_ NCAA ID: \_\_\_\_\_

Date: \_\_\_\_\_

The NCAA Eligibility Center needs to establish the initial full-time collegiate enrollment date of the student-athlete named above in order to proceed with his/her initial-eligibility evaluation. Please verify when the student-athlete has enrolled or plans to enroll full time.

PLEASE CONFIRM ONLY ONE OF THE FOLLOWING STATEMENTS ("A" OR "B") AND SIGN BELOW:

The undersigned understands that it is a violation of NCAA Bylaw 10.1 to knowingly furnish fraudulent or misleading information.

A. **I certify that I have never enrolled full time at any two- or four-year collegiate institution. I expect to enroll full time as of \_\_\_\_\_ (expected enrollment date – mm/dd/yyyy).**

If you were previously enrolled full time at another collegiate institution (college, university or junior college), indicate where you enrolled and the date of your first full-time enrollment.

B. **I enrolled full time at \_\_\_\_\_ (name of institution) on \_\_\_\_\_ (enrollment date – mm/dd/yyyy).**

\_\_\_\_\_  
**Student-Athlete Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Student-Athlete Printed Name**

Please return this to the NCAA Eligibility Center at the address listed below, email [ec-processing@ncaa.org](mailto:ec-processing@ncaa.org) or via fax to 317/968-5100.

NCAA Eligibility Center | Certification Processing | P.O. Box 7136 | Indianapolis, Indiana 46207