NAIA CERTIFICATE OF CLEARANCE

Institution: _____ **State:** _____

In accordance with the Family Educational Rights and Privacy Act, I, the undersigned, hereby authorize the Faculty Athletics Representative, Athletics Director and registrar of the institution I am attending to release any and all information about me which pertains to my eligibility to participate in intercollegiate athletics. The release of such information shall be restricted to any and all official representatives of the National Association of Intercollegiate Athletics (NAIA), the conference and/or region, and its member representatives (if applicable), only for the purpose of determining my eligibility for intercollegiate athletics. It is further understood that I may receive copies of such material from the institution upon request.

The above statement is applicable for the sport of: _____ Academic Year: _____

This form is to be completed in duplicate. One (1) copy is to be retained by the institution, with the original to be sent with the Official Eligibility Certificate to the eligibility chair.

Signature of Student-Athlete	Print or Type Student-Athlete's Name	Student ID (optional)	Date

As a representative of an institution affiliated with the NAIA, I hereby certify that the beginning statement of this certificate has been read to all student-athletes that are practicing or will participate in the above-named sport.

_____ _____ _____

AD or FAR Signature **Institution - Location** **Date**

(rev. 7/11/2006)

NAIA CERTIFICATE OF CLEARANCE *(page 2)*

Institution: _____ **State:** _____

Signature of Student-Athlete	Print or Type Student-Athlete's Name	Student ID (optional)	Date

As a representative of an institution affiliated with the NAIA, I hereby certify that the beginning statement of this certificate has been read to all student-athletes that are practicing or will participate in the above-named sport.

AD or FAR Signature	Institution - Location	Date