





**NAIA TRANSFER PLAYER ELIGIBILITY STATEMENT**

**THIS SIDE MUST BE COMPLETED BY THE FACULTY ATHLETICS REPRESENTATIVE**

**I VERIFY THAT I HAVE CONFIRMED OR HAVE BEEN INFORMED BY MY ATHLETICS DIRECTOR WHO HAS CONFIRMED THAT (INITIAL APPROPRIATE LINE):**

NAME OF STUDENT \_\_\_\_\_ FILING INSTITUTION \_\_\_\_\_ STATE: \_\_\_\_\_

**Student previously identified at four-year institutions only**

\_\_\_\_\_ The student did not participate at the immediately previous four-year institution. The residency rule shall not apply.

\_\_\_\_\_ The student participated at the immediately previous four-year institution. The student has a minimum overall GPA of 2.000 (on a 4.000 scale), **and** we have received a written release for this student from the Director of Athletics at the immediately previous four-year institution. If the student attended more than one institution, our registrar computed the student's GPA from all courses taken at all previous institutions. The residency rule shall not apply.

**Student previously identified at two-year institutions only**

\_\_\_\_\_ The student's previous identification was with a two-year institution only. The student has **never** identified with a four-year institution. The residency rule shall not apply.

**Student previously identified at both four-year and two-year institutions**

\_\_\_\_\_ The student's immediately previous identification **and** participation was with a two-year institution. The residency rule shall not apply.

\_\_\_\_\_ The student identified and participated at the immediately previous four-year institution. The student identified at a two-year institution (the student may or may not have participated at the two-year institution). The student has a minimum overall GPA of 2.000 (on a 4.000 scale), **and** we have received a written release for this student from the Director of Athletics at the immediately previous four-year institution. If the student attended more than one institution, our registrar computed the student's GPA from all courses taken at all previous institutions. The residency rule shall not apply.

\_\_\_\_\_ The student participated at the immediately previous two-year institution but did not participate at the immediately previous four-year institution. The residency rule shall not apply.

\_\_\_\_\_ The student did not participate at either the immediately previous two-year institution or the immediately previous four-year institution. The residency rule shall not apply.

**No Exceptions**

\_\_\_\_\_ The student does/did not qualify for an exception to the residency regulation. The opening date of classes for this student at our institution is/was \_\_\_\_\_ The student will satisfy or satisfied the 16-calendar week (112 days) residency on \_\_\_\_\_ which is/was the day following the 16-week period

**IF ANY PERIOD OF TIME IS MISSING BETWEEN HIGH SCHOOL GRADUATION AND ENROLLMENT AT YOUR INSTITUTION YOU MUST HAVE THE STUDENT ACCOUNT TO YOU FOR THE MISSING TIME.**

**I have examined the student's academic records and, based on that material, all information provided on this form is accurate.**

Date \_\_\_\_\_ Signed \_\_\_\_\_  
Faculty Athletics Representative Institution