Student-Athlete Eligibility Transfer Tracking Form

Please complete the following information regarding a recent transfer student-athlete from your college and send back to that NJCAA Member College.

To: __________________________________________ at __________________________________________
Athletic Director      College Name

From: __________________________________________ at __________________________________________
Athletic Director      NJCAA Member College Name

___________________________________ has expressed an interest in participating in athletics or has transferred to our

Student-Athlete Name
College ___________________________________ and would like to compete in our ________________________ program.
            NJCAA Member College          Sport(s)

In order to certify the student-athlete’s eligibility status under NJCAA bylaws, we ask your assistance in responding to the following questions.

1. Dates/terms the student-athlete attended your institution: ______________________________________________

2. Did the student-athlete transfer from another institution to your institution?
   Yes _____     No _____     Not to my knowledge _____
   If “Yes”, please list all institution(s): ___________________________________________________________

3. Did the student-athlete receive athletically related financial assistance from your institution during his/her years of attendance?
   Yes _____     No _____

4. Has the student-athlete ever been granted a medical hardship while at your institution or any previous institution?
   Yes _____     No _____     Not to my knowledge _____     If “Yes”, please include the season: __________

5. Did the student-athlete participate during the regular season in intercollegiate athletics at your institution beyond participation in limited pre-season tryouts? (Please select one.)
   Yes: Practiced only ______     Yes: Practiced and participated in regular season games ______
   No: Did not practice or participate ______     No: Red-shirted ______ (Which year? ______)

6. Did the student-athlete participate on a club team at your college? Yes _____     No ______

7. How many seasons of eligibility has this student-athlete utilized and in what sports at your college? Please include any club participation.
   Sport: _______________________________ Number of seasons: ______________________________
   Sport: _______________________________ Number of seasons: ______________________________
   Sport: _______________________________     Number of seasons: ______________________________

______________________________________________ ___ ___________________________________________
Print Name of Person Completing Form  Title of Person Completing Form

______________________________________________ ___ ___________________________________________
Signature of Person Completing Form  Date

* Do not send this form to the NJCAA National Office. This form is not a mandatory form for member colleges to utilize, however if used it should be included with eligibility audits. This form may be sent to any college in any athletic organization: NCAA, NAIA, NJCAA, CCLC, etc. This form will help NJCAA member colleges in answering more questions regarding this student-athlete’s eligibility prior to transferring. *