



HUSKIE ATHLETIC COMPLIANCE OFFICE



Male Practice Player Roster Addition Form

Student-Athlete Section

Name _____

Sport _____

Term/Year of NIU enrollment _____

Student ID# _____

Sport Coach Section

- 1. I understand the above SA is not eligible for athletic financial aid. YES NO
- 2. I understand the above SA is not eligible for room and board expenses. YES NO
- 3. I understand that the SA must abide by all practice hour limitations. YES NO

Signature of Coach _____

Date _____

Athletic Training Section

- 2. This SA has completed a physical and is medically cleared to participate. YES NO

Signature from Sports Medicine _____

Date _____

NCAA Compliance Section

- 1. Is the SA still within their five year clock? YES NO N/A
- 2. Is the SA enrolled full tme? YES NO N/A
- 3. Did the SA complete the NCAA Drug Testing Consent Form? YES NO N/A
- 4. Did the SA complete the NCAA Student-Athlete Statement? YES NO N/A
- 5. (JC TRANSFER ONLY) Did the SA receive their AA? YES NO N/A
- 6. What is/was the SA's Initial Eligibility Status? Q NQ N/A
- 7. Is NCAA Clearinghouse certification required? YES NO N/A

Signature from NCAA Compliance _____

Date _____

Huskie Athletics Compliance Office Only

- CAi Updated
- Peoplesoft Updated

E-mailed: Financial Aid; Records & Registration; Sport AD; Athletic Training;
 Equipment Room; SAASS; Media Relations; Strength & Performance;
 Athletic Business Office; Ticket Office.

Date: _____