



SQUAD LIST ADDITION / DELETION FORM

Student – Athlete: _____ **SS#:** _____

Sport: _____ **Date:** _____

Please note the following information regarding the above named student – athlete.

Team Status Change (Please Check One)

1. New squad member – 1 will send him/her to your office to complete appropriate eligibility forms prior to any practice or game competition by them.

2. Delete from current squad list – As a result of this deletion, the student – athlete is no longer eligible to practice or compete with the team. Further, please send this student – athlete to the Assistant Director of Athletics/Compliance to complete an exit questionnaire.

Reason For Deletion

- _____ Voluntarily Withdrew from Team
- _____ Academic Drop Status
- _____ Other (please explain) _____

Financial Aid Status

- _____ Place on athletics aid for first time
- _____ Continue Athletic Financial Aid until conclusion of current academic year.
- _____ Cease all Athletic Financial Aid as soon as possible
- (Please contact the Assistant Athletic Director immediately for the review and implementation of the required procedures and documentation.)**
- Other (please explain):
- _____
- _____

Head Coach Signature

Date