



THIS SIDE IS TO BE COMPLETED BY THE FACULTY ATHLETICS REPRESENTATIVE

NAIA TRANSFER PLAYER ELIGIBILITY STATEMENT (page 2)

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 Eastern Oregon University STATE: OR

_____ The student did not participate in the sport of _____ at the immediately previous four-year institution and therefore the residency regulation does not apply for that sport.

_____ The student did not participate in the sport of _____ at the immediately previous two-year institution and therefore the residency regulation does not apply for that sport.

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

_____ The student participated in the sport of _____ at the immediately previous four-year institution. However, the student has a minimum **overall** grade point average of 2.000 (on a 4.000 scale), and we have received (in writing) a release for the student from the Athletics Director at the immediately previous four-year institution. If the student attended more than one institution our registrar re-computed the GPA from all courses taken. The residency requirement shall not apply.

_____ 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 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 ARE TO 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