



OUT-OF-RECRUITMENT AREA STUDENT CONTACT RECORD

FORM C

This form shall be completed by all student athletes who are from outside the recruitment area.

Directions:

- A. Have each out-of-recruitment area student complete this form at the time of or as soon as possible following first contact.
- B. When the student enrolls at your college, attach this FORM C to the college's copy of the eligibility FORM 1 for first-contact verification.

TO BE COMPLETED BY THE STUDENT ATHLETE: (Please print)

Name	Phone Number	Birth Date	Today's Date	
Your Current Address: Street		City	State	ZIP
High School of Last Attendance		Date of Last Attendance		
High School Address: Street		City	State	ZIP
List your sport(s)		List the community college(s) you would normally attend		

I hereby certify that I made the first contact with:

_____ College

and that I have chosen this college without prior contact by members of the staff or persons representing the college. I understand that any misinformation will result in loss of eligibility and forfeiture of contests.

Signature

Date

ATHLETIC DIRECTOR: PLEASE KEEP ON FILE AT YOUR CAMPUS.