

Date: 5/3/2024

## Athletics Tracer Form

RETURN TO: Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Office: \_\_\_\_\_

NAIA Eligibility Center ID: \_\_\_\_\_

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

### Athletics History

Institution: \_\_\_\_\_

Association:  NAIA  NCAA  NJCAA  CCCAA  NCCAA  Other: \_\_\_\_\_

Did this student participate in your athletic program?  Y  N

What sport(s)? \_\_\_\_\_

During what academic year(s)? \_\_\_\_\_

Total seasons of eligibility used at your institution? \_\_\_\_\_

Was the student charged a season of competition for participating in ONLY practice?  Y  N

During what academic year(s)? \_\_\_\_\_

Did this student receive a redshirt or hardship at your institution?  Y  N

If yes, please list the academic year(s) which the redshirt or hardship was received: \_\_\_\_\_

Was this student suspended from your athletic department, team, etc?  Y  N

If yes, please list the date(s) and requirements of the suspension: \_\_\_\_\_

Did this student participate in club sports at your institution?  Y  N

What sport(s)? \_\_\_\_\_

During what academic year(s)? \_\_\_\_\_

I, the undersigned, hereby certify that the above information is an accurate reflection of my athletic department's official records.

\_\_\_\_\_  
Athletics Official Name (please print)

\_\_\_\_\_  
Athletics Official Title

\_\_\_\_\_  
Athletics Official Signature

\_\_\_\_\_  
Date