



LIBERTY UNIVERSITY OFFICE OF ATHLETICS COMPLINACE
HISTORICAL REPORT FORM

To be prepared by each student-athlete prior to the academic year when reporting for a sport.

A. BIOGRAPHICAL INFORMATION

Last Name First Name Middle Initial

LUID# SS # DOB Age

Local Address: _____ On-Campus Off-Campus

Home Phone # Cell Phone #

LU Email Address

Ethnicity: Asian/Pacific Islander Hispanic Non-Resident Alien Black
 Native American/Alaskan Multiracial White

Gender: Male Female

Status: Incoming Freshmen Incoming Transfer Student Returning Student

Signed National Letter of Intent? Yes No *Recruited by LU? Yes No

Date of High School Graduation: _____

*according to NCAA legislation, you are a recruited student-athlete if any one of the following occurred: (please circle the number of the ones that apply to you)

- 1) You had an official visit; or
- 2) A coach visited you or your parent(s)/legal guardian(s) off of the institution's campus; or
- 3) A coach called you or your parent(s)/legal guardian(s) on more than one occasion.

Did you take classes during the 2010 summer? Yes No If so, where? _____

Fathers Name

Mothers Name

Home Phone #

Work #

Address

City

State

Zip Code

C. Transfer History

Enrollment as a full-time student in community college or university is defined by the NCAA as registering for 12 or more units and attending any one of the classes one time or practicing or competing in any sport, even if you subsequently withdrew.

If you attended a JC did you receive an AA degree? Yes No

Institution

Date

Received

| Education, Employment, Military Service History Since High School | | Year of Semester or Quarter Enrolled (PT/FT) | | | Sport | Practice | Compete | Signed NLI? | Athletic Aid? |
|---|--|--|-----------------------------|---------------------|-------|----------|---------|-------------|---------------|
| Academic Year | Institution (2- or 4-year) or Military *please specify 2 or 4 yr. | 1 st Sem/ Qtr | 2 nd Sem/ Qtr | 3 rd Qtr | | Y or N | Y or N | Y or N | Y or N |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

I certify that all answers given by me are correct. I understand that providing false or withholding information could render me ineligible for competition. In order to determine and confirm my athletic eligibility I, the undersign, do hereby authorize consent to the release by this University to the appropriate conference and national organization and their officials any and all records including but not limited to my academic, attendance, and athletic records, which are necessary to determine my eligibility to compete in any intercollegiate athletic event sponsored or approved by and conducted in accordance with the rules of the Big South conference or NCAA. My social security number has been voluntarily submitted to use for identification purposes.

Student-Athlete Signature

Date