American Collegiate Hockey Associatior Women's Division 2

STUDENT ATHLETE ELIGIBILITY FORM

FALL 2009

DIRECTIONS: This form must be **received** by the ACHA Women's Division Commissioner by **10/20/09**. Team Representative and Student Athletes to complete Sections 1 and 2, along with Student Athlete Consent Form. Deliver both forms to the Registrar of your school, who will complete Sections 3 and 4. ONLY THIS ORIGINAL FORM WILL BE ACCEPTED - no attachments or alternate forms of reporting. Questions? Please e-mail acollier@achahockey.org.

Registrar shall mail both forms directly to: Ashley Collier, ACHA Women's Division Commissioner, 4103 Academy Drive, Opelika, AL 36801

SECTION 1: TEAM INFORMATION

Name of School:
Team Representative:
Address:

City/State/Zip:
Phone:
E-mail address:

SECTION 3: REGISTRAR INFORMATION

School Registrar:
Address:

City/State/Zip:
Phone: ( ) Fax: ( )
E-mail address:

SECTION 2: COMPLETED BY TEAM/STUDENT

Student Athlete Name (Last, First, M.I.)	Student ID Number

SECTION 4: COMPLETED BY REGISTRAR

New Transfer? Check if Yes	Spring 2009 Credits Passed	Fall 2009 Credits Enrolled	At least Half-Time status Fall 2009? Yes / No	Total University Credits Earned	Fall 2009 Class Standing (Fr, So, Jr, Sr, Grad/PhD)	Cumulative GPA

CONSENT TO RELEASE INFORMATION

** The above-listed student athletes, by their signature on the attached Student Athlete Consent Form, consent to the release of grades, academic standing, and records information to the American Collegiate Hockey Association (ACHA) and their respective hockey team and coaching/administrative staff for the purpose of determining their athletic eligibility for the 2008-09 hockey season.*

REGISTRAR VERIFICATION

I certify that the records above are correct.

Signature and/or Seal

Date Certified