



# Walk-On Certification

Office of Compliance Services- University at Albany

**This form outlines the steps that a student must complete in order to participate in activities designated as practice per NCAA Bylaw 17.02.1 at the University at Albany. It is necessary to confirm that each student meets the basic eligibility, academic and physical/health requirements for participation. The student will not be allowed to participate or receive equipment until he/she has completed this entire form and returned it to their respective coach.**

Full Name of Student: \_\_\_\_\_  
Sport(s): \_\_\_\_\_ UA ID #: \_\_\_\_\_  
UA Email: \_\_\_\_\_ Mobile #: \_\_\_\_\_

**Step #1** – I certify that I am a full-time student and enrolled in a program of studies leading to a baccalaureate/graduate degree and to the best of my knowledge and in good health and physically fit for practice and competition. I agree to comply with all rules and regulations of the University at Albany, the America East (Colonial Athletic Association: MFB only, Metro Atlantic Athletic Conference: WGO only), and the NCAA. I understand that I will not be allowed to participate until I have acquired the signatures of each office below.

\_\_\_\_\_  
Student’s Signature Date

**Step #2** – The above named student will be given permission to practice with my team once all eligibility and physical requirements are properly documented. I understand that this student is not allowed to receive any equipment or participate in a practice session until he/she has returned a completed copy of this form to me.

\_\_\_\_\_  
Head Coach’s Signature Date

**Step #3** – The above named student has completed all physical and medical requirements for athletics participation.

\_\_\_\_\_  
Athletic Trainer’s Signature Date

**Step #4** – The above named student has been regularly admitted, is enrolled as a full-time student at the University at Albany and completed all athletics forms in ARMS.

Temporary Practice Dates: \_\_\_\_\_

\_\_\_\_\_  
Compliance Office Signature Date

**Return this form to the Office of Compliance Services, 3<sup>rd</sup> Floor, PE Building.  
You may not participate in any UAlbany-sponsored sport until you have completed NCAA, Conference, and University athletics participation forms.**

*Cc: Athletic Training, Strength Staff, Academic Services, Head Coach*



**Walk-On Certification**

*Office of Compliance Services- University at Albany*

**OFFICE OF COMPLIANCE SERVICES USE ONLY**

**ATHLETIC FORMS COMPLETED IN ARMS:** Yes  No

**BACKGROUND INFORMATION**

1. *Date of Initial Enrollment:* \_\_\_\_\_

2. *Date of UAlbany Enrollment:* \_\_\_\_\_

3. *Enrolled in 12 hours:* Yes  No

4. *Freshmen*

a. *NCAA Initial Eligibility Status*

Academics: Qualifier  Academic Redshirt  Nonqualifier   
Amateurism: Certified  Certified with Conditions  Not Certified

5. *Recruited Student-Athlete:* Yes  No

6. *Two-Year College Transfer*

a. *NCAA Initial Eligibility Status*

Academics: Qualifier  Academic Redshirt  Nonqualifier   
Amateurism: Certified  Certified with Conditions  Not Certified

b. *A.A. Degree:* Yes  No  *Date Received:* \_\_\_\_\_

c. *Transfer tracer(s) on file:* Yes  No

7. *Four-Year College Transfer*

a. *Permission to contact from former four year institution:* Yes  No

b. *Granted one-time transfer exception, if applicable:* Yes  No

8. *Continuing Student*

a. *Sophomore*  *Junior*  *Senior*  *Graduate Student*

b. *Total credits earned:* \_\_\_\_\_

c. *Cumulative GPA:* \_\_\_\_\_

**ELIGIBILITY**

1. *Practice and Competition:* Yes  No  *Start Date:* \_\_\_\_\_

2. *Practice Only:* Yes  No  *Dates:* \_\_\_\_\_

3. *Temporary Practice:* Yes  No  *Dates:* \_\_\_\_\_

**ADDITIONAL NOTES**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

\_\_\_\_\_  
Compliance Office Signature

\_\_\_\_\_  
Date