

## **Auburn Athletics Compliance Office** Request For On- & Off-Campus Employment

THIS FORM IS TO BE COMPLETED BY ALL STUDENT-ATHLETES DESIRING EMPLOYMENT. THIS FORM MUST BE COMPLETED PRIOR TO THE COMMENCEMENT OF EMPLOYMENT.

Name:	Date:
Banner ID:	Sport:
Your Cellular Telephone:	
Your E-Mail Address:	
<b>STEP #1:</b> Student Affirmation: I certify that I am a full-time student-athleligible to be employed. I agree to comply with all the rules and regulations be permitted to earn legitimate on-or off-campus employment income durin (Proceed to next step: receiving your head coach's approval)	s of the University, SEC and the NCAA. I understand that I will
STUDENT'S SIGNATURE	DATE
<b>STEP #2:</b> Head Coach Affirmation: I agree to allow the above-named str ( <i>Proceed to next step: receiving your academic counselor's approval</i> )	udent-athlete to be employed during the academic year.
HEAD COACH SIGNATURE	DATE
STEP #3: Academic Counselor Affirmation: I certify that the above-name certify that the student-athlete has a cumulative GPA of 2.0 or better. (Proceed to next step: receive Auburn Athletics Compliance approval)	ned student is academically eligible to compete. I further
ACADEMIC COUNSELOR SIGNATURE	DATE
STEP #4: <u>Auburn/NCAA Compliance Affirmation</u> : The above-named student has completed all required Compliance forms. (Submit form to Compliance Office)	
COMPLIANCE OFFICE SIGNATURE	DATE