### University of South Carolina Athletics

SECTION A: REQUESTING GROUP/AGENCY INFORMATION

### Office of Compliance Services

## Form 12.2 Student-Athlete Appearance Request



This form, when signed by the requesting entity and approved by all appropriate University of South Carolina Athletics Department officials, allows student-athlete appearance occur as requested by the requesting entity. In submitting this form, the requesting entity recognizes that the following criteria MUST be met in order for a student-athlete appearance request to be considered including:

- 1) The request MUST be submitted to the University of South Carolina Director of Student-Athlete Development at least four (4) weeks prior to the date of the requested appearance
- 2) The request MUST include a cover letter highlighting the event and the student-athletes purpose at the event
- 3) The request MUST include a fully completed copy of this form and submitted to the Director of Student-Athlete Development for consideration
- 4) If a charitable group, the request MUST include a copy of the group's government recognized 501(c)3 status

If any of the above criteria are not met, the request for a student-athlete appearance will be denied. Please note that the University of South Carolina reserves the right to approve or deny requests regardless of the permissibility of the request under NCAA rules. Additionally, if a group is interested in a University of South Carolina coach or athletics department staff member appearance, the group should fill out the *Coach Appearance Request Form*.

Name of Requesting Individual:		Type of Individual/Requesting Group:  □ USC Student-Athlete □ USC Coach/Staff Member		
			Group not affiliated with USC	
Name of requesting group/agency (if applicable)		Organization Web Ac		
Group/Agency Description (check one) – must provide proof of 501(c)3 status			Tax Identification Number	
☐ High School ☐ K-8 School ☐ USC Group ☐ Charitable Group ☐	Comm	ercial Entity		
Other (please provide explanation):		-		
Name of contact person for requesting group/agency	Contac	E-mail Address		
	To!		7. "	
Address (street, city, state, zip)	Phone :	ŧ	Fax #	
SECTION B: STUDENT-ATHLETE APPERANCE INFORMATION				
How many student-athletes would you like to attend the appea	rance?			
What team(s) would you like to be involved in the appearance?	•			
Name of Event	f Event Date & Time of Appearance		pearance	
Will student-athletes be provided with any of the following? (circle all that ap	oly)			
☐ Meal ☐ Transportation ☐ Nominal Gift (please provide		planation and ap	proximate value of gift)	
Transportation I Tronman One (preuse provide	ie uni ex	pranation and ap	proximate varue of girty	
☐ Other (please provide explanation):				
Location & Address of the Event:				
Purpose for requesting the student-athlete appearance and how	will th	e student-athlete	(s) contribute to the event?	
			,	
Will the student-athlete appearance result in money being raise		Yes   No		
If yes, please describe where the proceeds from the donation ar	nd/or st	udent-athlete app	pearance will be distributed:	

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SECTION C: STUDENT-ATHLETE APPERANCE QUESTIONS

Ple	ease answer the following promotion/donation specific questions:		
1.	Will the event involve any commercial agencies or sponsors (e.g, BILO, BB&T, etc)	□ Yes	□ No
	**If yes, you MUST attach a detailed description of the role of the sponsor**		
2.	Will the name, likeness or image (including photos) of any student-athlete(s) be used to publicize the	□ Yes	□ No
	appearance through an announcement, advertisement or promotion of the event?		
	**If yes, you MUST attach a copy of the announcement or advertisement, including internet promotions**		
3.	Will the appearance involve students who have started 9th grade in any manner?	□ Yes	□ No
4.	Will the student-athlete appearance be used for fundraising purposes?	□ Yes	□ No
5.	Will funds raised by the student-athlete appearance directly or indirectly benefit a group?	□ Yes	□ No
	If yes to #5: Is the group associated with a high school or high school booster group?	□ Yes	□ No
6.	Will the funds raised directly or indirectly benefit an individual?	□ Yes	□ No
	If yes to #6: Is that individual a high school student?	□ Yes	□ No
7.	Will the funds raised go directly to a charity?	□ Yes	□ No
8.	What is the age range of the individuals who will benefit from the funds raised and/or donated items?		
	Below 9th grade	□ Yes	□ No
	High School (Grades 9-12	□ Yes	□ No
	Post Secondary (Graduated from HS, not enrolled at a two year college)		□ No
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#### SECTION D: GROUP/AGENCY RECOGNITION OF TERMS AND CONDITIONS

All contact persons for groups/agencies requesting a student-athlete appearance from the University of South Carolina Athletics Department are required to recognize the following:

- Student-athletes may not miss class to make an appearance;
- Student-athletes must receive written approval from the Director of Student-Athlete Development and Office of Compliance Services prior to making an appearance;
- Money derived from a student-athlete appearance may ONLY go directly to an educational, charitable, institutional or nonprofit agency;
- Student-athletes may only participate in appearances that do not involve co-sponsorship, advertisement or promotion by a commercial agency;
- Student-athletes may only accept legitimate and normal expenses such as meals and travel from the institution;
- Student-athlete name, image, or likeness (including photos) may not be utilized to promote the commercial ventures of any
- All appearances must be within reasonable distance of the University of South Carolina campus.
- The University of South Carolina reserves the exclusive right to approve or deny any student-athlete appearance request based on NCAA rules, institutional policy or other criteria considered by the institution on a case-by-case basis. Providing all of the necessary information DOES NOT guarantee that a request will be approved.

I certify that I have filled out this form correctly and accurately to the best of my knowledge. I have read the terms and conditions for submitting this request to the University of South Carolina Athletics Department and agree to abide by these terms and conditions, along with all NCAA rules and regulations. I understand that failure to provide accurate information on this form, or failing to abide by the terms and conditions of this request or NCAA rules and regulations may jeopardize the eligibility of student-athletes or may result in a NCAA violation.

Group/Agency Authorized Representative Signature	Date

# University of South Carolina Athletics

## **Office of Compliance Services**

## Form 12.2 Student-Athlete Appearance Request



SECTION E: INSTITUTIONAL APPROVALS (For University of South Carolina Use ONLY)		
Office of Compliance Services Signature	Approval	Date
	□ Yes □ No	
Student-Athlete Development Signature	Approval	Date
	□ Yes □ No	

### STUDENT-ATHLETE APPROVAL

I certify that I have reviewed this form and that to the best of my knowledge the donation and/or appearance that I will be involved with is permissible under NCAA rules. I have read the terms and conditions required of donations and/or student-athlete appearances for student-athletes at the University of South Carolina and agree to abide by these terms and conditions, along with all NCAA rules and regulations. I understand that failure to abide by the terms and conditions of this request or NCAA rules and regulations may jeopardize my eligibility or may result in a NCAA violation.

Sport	Student-Athlete Name (PRINT PLEASE)	Student-Athlete Signature	Date
Sport	Student-Athlete Name (PRINT PLEASE)	Student-Athlete Signature	Date
Sport	Student-Athlete Name (PRINT PLEASE)	Student-Athlete Signature	Date
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