



TRYOUT CLEARANCE

The University of Texas at San Antonio

Student's Name: _____ Sport: _____

Student's UTSA ID#: _____ High School: _____

Students Email: _____ High School Grad Date: _____

Date Enrolled at UTSA: _____ Previous Colleges Attended: _____

I certify that I am a full-time student at the University of Texas at San Antonio and that to the best of my knowledge I am in good health and physically fit for practice and competition. I agree to comply with all of the rules and regulations of this university, C-USA and the NCAA. I understand that I will not be allowed to practice until I have been approved by each office in the clearance process.

Student's Signature: _____ Date: _____

Step 1- Receive the signature of the coach

I agree to allow this student to participate in a limited tryout. I understand that eligibility must be confirmed prior to adding student to the roster.

Coach's Signature: _____ Date: _____

Step 2- Obtain approval from the training room staff

The student has passed a medical exam and has signed the Medical History and Consent Waiver.

Trainer's Signature: _____ Date of Physical: _____

Step 3- Receive final approval from the Athletics Compliance Office (MS 1.02.66)

Registered with Eligibility Center? Yes No Enrolled Full-Time? Yes No
Qualifier Non-Qualifier Pending

Amateurism Status Recruited? Yes No
Final Certified Pending Must Request Final

Student is a: Tracer sent to previous institution? Yes No
Freshman Transfer Continuing Student

First FT term of enrollment: _____

This student is:

Approved to tryout. (after 14 days, student must be cut or added to the roster.)

Not Approved to tryout.

Compliance Office Signature: _____ Date: _____