



Declaration of Pre-Existing Relationship Form

This form should be completed and returned to the Athletics Compliance Office any time an institutional employee or booster believes he/she has a relationship with a prospective student-athlete (PSA), prospective student-athlete's parents, friends or relatives, student-athlete (SA) or student-athlete's parents, friends or relatives which may result in a NCAA violation if continued.

For the purposes of this form, "RELATIONSHIP" means the type and frequency of contacts with the PSA or SA (or the PSA/SA parents, friends or relatives) including the number, nature and frequency of activities and events in which you and the PSA/SA (or the PSA/SA parents, friends or relatives) participated.

Staff Member or Booster Name: _____ Sport: _____

PSA/SA Name: _____ Date: _____

Please provide dates for each of the following questions.

When did the athlete become a prospective student-athlete? _____
(month/year)

When did the prospective student-athlete enter the 9th grade? _____
(month/year)

Please describe when you first met the PSA/SA or his/her parents/friends/relatives, and how the relationship developed:

Has the relationship changed in any way since the PSA/SA became a skilled athlete? Yes No

If Yes, please describe:

Has your relationship with the PSA/SA been continuous? If No, please detail any interruptions: Yes No

Did your relationship with the athlete or athlete's parents develop because of the prospective/current student athlete's participation in athletics? Please briefly explain the circumstances. Yes No

Did your relationship with the current/prospective student-athlete predate his/her status achieved as a result of his/her athletics ability or reputation? Please explain briefly. Yes No

If the athlete is a current student, do you provide him/her (or his/her family) with the same benefits that you did before the student-athlete participated at the University of Miami? Please explain. Yes No N/A

Please provide specific information regarding the frequency and nature of benefits (housing, meals, entertainment, gifts, vacations, etc.) you have provided to the PSA/SA (or PSA/SA parents/friends/relatives) during the course of the relationship.

Number of visits/stays at your home.

0 1-10 11-21 21-30 31+

Number of "away from home" entertainment activities. (Includes dining out, movies, sporting events, etc.)

0 1-10 11-21 21-30 31+

Total value of entertainment activities.

\$0-10 \$11-50 \$51-100 \$101-1000 \$1001+

Please list specific examples of entertainment provided to the prospective student-athlete (or athlete's parents).

Number of gifts given to PSA/SA (or PSA/SA parents/friends/relatives).

0 1-10 11-21 21-30 31+

Total values of gifts.

\$0-10 \$11-50 \$51-100 \$101-1000 \$1001+



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Please list specific examples of gifts provided to the PSA/SA (or PSA/SA parents/friends/relatives).

My signature certifies that, to the best of my knowledge, the above responses are correct. Furthermore, I understand that certain pre-existing relationships under NCAA regulations or unreported pre-existing relationships may cause the above named prospective student-athlete or student-athlete to become ineligible to participate in intercollegiate athletes at the University of Miami should I provide the PSA/SA, his/her parents, friends, or relatives with impermissible benefits or inducements.

Signature of Staff Member or Booster: _____

Date: _____

Compliance Signature : _____

Date: _____