

Coach/Staff Member's Signature_____

Please submit requests to the Compliance Office at least 3 days prior to the meal. All occasional meals must receive prior approval from the Compliance Office.

NCAA Rules to Remember

- A student-athlete or the entire team in a sport may receive an occasional meal in the locale of the institution on infrequent and special occasions from an institutional staff member. An institutional staff member may provide reasonable local transportation to student-athletes to attend such meals.
- Prospects on an OFFICIAL VISIT can attend an occasional meal located on or off campus.
- Prospects on an UNOFFICIAL VISIT can only attend an occasional meal located on campus and must pay.

Sport:		
Coach/Staff Member		
Location of Meal:		
Date: Description of Occasion:	Time:	

Persons attending: Please list **all** individuals who will attend and their relationship to the Department of Athletics (e.g., coach, student-athlete, parent of student-athlete, etc.) Please attach a list if necessary.

NAME	RELATIONSHIP	NAME	RELATIONSHIP
By signing the below, I c will be served in my hom		ted on this form is complet	e and accurate and that the meal

The occasional meal request has been:

Approved

Compliance Office ______
Date ______

Date____