Longwood Athletics Tryout Form

Per NCAA Bylaws 30.13 and 14.1.4.3, an individual may "try out" for a team for a 14 day period before being required to complete the NCAA Drug Testing Consent Form and being placed on the institution's squad list. Bylaw 17.1.5 requires that all individuals complete the mandatory medical examination prior to any countable activity; therefore all individuals must be cleared by our Athletic Training Staff in writing.

In order to be cleared for tryout, please complete the following steps:

1. Head Coach is responsible for completing the Tryout Form with complete and accurate information.
2. Head Coach is responsible for coordinating with tryout participants and the Athletic Training Staff to receive medical clearance.
3. Compliance Office must receive confirmation for Athletic Training Staff of medical clearance.
4. Compliance Office will sign and approve tryout period and tryout participants. Head Coach will be provided a signed copy of this form as approval that the tryout is permissible.

Sport: _____ Tryout Period:_____
Tryout Period may not exceed 14 consecutive days.

Tryout Participants

Name	**Date of Medical Clearance***
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

*Medical Clearance certified by Athletic Training Staff and Compliance Office

By signing this form, I acknowledge my understanding that only the participants listed may practice during the designated tryout period. I also acknowledge that no participant may compete against outside competition during this tryout period. Finally, I acknowledge that if the 14 days expires or I wish to add a participant to my roster, I am responsible for coordinating with the Compliance Office the completion of all necessary documentation with the student-athlete and eligibility certification. Only after I receive official written confirmation from the Compliance Office will a participant be allowed to continue to practice after the tryout period or compete at ANY time.

_____ _____
Head Coach **Date**

Tryout Approved: ❑ Yes ❑ No _____ _____
Compliance Designee **Date**