Texas A&M International University Institution: Date: __ Student-Athlete: Sport: The above referenced student has requested a transfer to Texas A&M Internatinal Univeristy to compete in the sport indicated. We would appreciate your cooperation in completing and returning this form at your earliest convenience in order to provide us information specific this student's eligibility and intercollegiate history. **General Information** ____ Yes 1. Do we have permission to contact this SA pursuant to NCAA Bylaw 13.1.1.2? ___ No 2. Dates SA attended your institution: Start (Term/Year): End (Term/Year): 3. List the number of semester/quarters (circle one) SA was enrolled full-time: 4. Did SA previously transfer from another institution to your institution? Yes No If yes, which institution(s)? _____ Yes No 5. Was SA recruited by your institution as defined by Bylaw 13.02.10.1? 6. Did SA sign a National Letter of Intent to attend your institution? Yes No If yes, did SA fulfill NLI requirements? ____ Yes **Eligibility History** ___Q ___PQ ___NQ ___No 7. Did SA receive a final academic certification from the NCAA Eligibility Center? ____ Yes If a partial qualifier or nonqualifier, was an initial eligibility waiver granted for SA? ___ No __ Yes 8. Did SA receive a final amateurism certification from the NCAA Eligibility Center? ___ No ___ No If certified with conditions, has SA met all applicable conditions? ____ Yes ___ No 9. Upon departure, was SA in good academic standing at your institution? Yes 10. Upon departure, was SA meeting all applicable progress toward degree requirements? No Yes Yes No 11. Is SA currently eligible to compete in athletics at your institution? Yes 12. Did student-athlete pass 9 hours their last full time? No **Transfer Exceptions** ___ No 13. Is SA under any disqualification or suspension for a disciplinary reason per Bylaw 14.5.1.1? Yes 14. Is SA ineligible due to a positive NCAA drug test? No 15. Should SA qualify, does your institution grant the use of the one-time transfer exception? Yes ___ No N/A 16. Has SA's sport been discontinued at your institution? Yes ___ No 17. Has SA's academic program been discontinued at your institution? Yes ___ No 18. Has SA graduated from your institution Yes No **Participation History** 19. Did SA participate (beyond a 14-day tryout period) in intercollegiate athletics No at your institution? If yes, please complete chart below.

Sport	Year	Participation (Practice or Compete)	Received Athletic Aid
18. Was SA granted a medical har	dship at your institution or any pre	evious institution(s)? Yes	No

Signature:

Name of person completing form: Title: