

NCGA Transfer Eligibility Form

Please complete one form for each post-secondary institution you attended prior to attending your current NCGA institution.

Please clearly print in blue or black ink.

Student-Athlete Information

Full Legal Name

Date of Birth (M/DD/YY)

Current Institution

Previously Attended Institution

Name of Institution: _____

Dates or terms of attendance: _____

(Ex. Fall 2019 & Winter 2020 or August 2019 to April 2020)

Athletic Participation

Did you participate in club or intercollegiate athletics at your previous institution? ☐ YES ☐ NO

If you answered **NO**, please skip to the *Academic Information* section.

If you answered **YES**, please answer the remaining athletics related questions:

What sport/which sports did you participate in?

Which season(s)/year(s) did you participate?

Would you have been eligible for athletics had you remained at your previous institution?

☐ YES ☐ NO ☐ UNSURE

Were you under any disciplinary action by the club sports department or athletic department?

☐ NO ☐ YES-explain: _____

Academic Information

You will be asked to provide a transcript or have a school official complete a verification form prior to your NCGA eligibility being certified.

<i>For your previously attended institution</i>	Last Term of Attendance	Total at Institution
Credits Attempted		
Credits Earned		
Credits in GPA		
Quality/Grade Points Earned		

Student-Athlete Acknowledgement

In accordance with the Family Educational Rights and Privacy Act (FERPA), I, the undersigned, hereby authorize the Activities or Athletics Director, the grappling team leadership, and Registrar of the institution I am attending and the institution I previously attended to release any and all information about me which pertains to my eligibility to participate in the National Collegiate Grappling Association (NCGA). The release of such information shall be restricted to any and all official representatives of the NCGA, the Conference, and its member representatives (if applicable), for any official purpose deemed necessary by the NCGA, and in accordance with the NCGA Grappling Rules, Policies, and Procedures. It is further understood that I may receive copies of such material from the institution upon request.

Print Name of Student-Athlete

Student-Athlete's Signature

Date

NCGA Coach/Leadership Acknowledgement

I attest the above answers are correct, to the best of my knowledge of the student-athlete.

I agree to hold the student-athlete from competition until the NCGA verifies the student-athlete transfer eligibility.

Print Name of Coach/Team Leadership

Signature

Date © - 01/04/2025