FORM C



OUT-OF-RECRUITMENT AREA STUDENT CONTACT RECORD

This form shall be completed by all student athletes who are from outside the recruitment area.

DIRECTIONS:

- A. Have each out-of-recruitment area student complete this form at the time of or as soon as possible following first contact.
- B. When the student enrolls at your college, attach this FORM C to the college's copy of the eligibility FORM 1 for first-contact verification.

TO BE COMPLETED BY THE STUDENT ATHLETE:

(Please type or print)

Name	Phone Number	Birth Date	Today's Date
Your Current Address: Street, City, Sta	ate, Zip Code		
High School of Last Attendance		Date of Last Attendance	
High School Address: Street, City, Sta	te, Zip Code		
List your sport (s)	List the community college(s) you would normally attend		
I hereby certify that I made	the first contact with	:	
and that I have chosen this college	without prior contact by n	nembers of the staff or ne	Colleg
college. I understand that any misir			
Si	gnature		Date