

**INSTITUTIONAL PERMISSION FOR OFFICIAL VISIT**

FOR: Certify compliance with Bylaw 13.6.3 – Requirements for Official Visit.  
 ACTION: Coach completes all sections, obtains sport administrator’s signature, attaches documentation as indicated and submits to Assistant Athletics Director/Compliance.  
 DUE DATE: Must be completed at least two weeks prior to official visit.  
 REQUIRED BY: NCAA Bylaw 13.6.3 and GW Athletics Department.  
 PURPOSE: Assist in maintaining records of Official Visits.

**PART A**

Date: \_\_\_\_\_

Sport \_\_\_\_\_ Prospect's Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_ NCAA Eligibility Center ID \_\_\_\_\_

Recruiting Coach \_\_\_\_\_

Applicable Dead Period for Sport \_\_\_\_\_

Prospect’s Status:  \*High School  \*\*2-Year Transfer  \*\*4-year Transfer

\*High School Name: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

\*\* College Name: \_\_\_\_\_ Date of Graduation (2-Year Only): \_\_\_\_\_

**Prospect has registered with the NCAA Eligibility Center (REQUIRED)**  Yes  No

Has Admissions received SA Cover Sheet?  Yes  No

Has prospect applied for admission to George Washington University?  Yes  No

Has prospect been accepted to George Washington University?  Yes  No

**\*\* For transfers only\*\***

Has permission to speak letter been received (4-year only)?  Yes  No

Has transfer release request been completed (2 and 4-year)?  Yes  No

**DOCUMENTATION REQUIRED:**

Attach the following materials (Bylaw 13.6.3)

ACT or SAT Test Score for high school prospect only (May be presented on High School Transcript)

High School or College Transcript (doesn’t have to be official)

**AND**

Detailed visit itinerary

Airline, bus or train itinerary

**COMPLIANCE COORDINATOR:**

Written Notification of Official Visit: \_\_\_\_\_  
(Date Sent)

Placed on IRL:  Yes  No

\_\_\_\_\_  
Sport Administrator’s Signature (Pre-Visit)

\_\_\_\_\_  
Date

**COACH MUST COMPLETE REVERSE SIDE OF FORM IN FULL**

ALL SECTIONS MUST BE COMPLETED IN FULL

PART B: Visit Information

Arrival Date \_\_\_\_\_ Time \_\_\_\_\_ Departure Date \_\_\_\_\_ Time \_\_\_\_\_

Accompanied by Other(s):  Yes  No

If Yes: Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

PART C: Expenditures – check off AND indicate amount if WE are paying and/or reimbursing

Transportation: (Place ✓ in box for transportation to be used)
 Car Mileage (\_\_\_\_\_ miles @/\_\_\_\_\_ mile) \$\_\_\_\_\_
Airplane:  National  \*Dulles  \*BWI Airfare \$\_\_\_\_\_
\* 48 hours begins and ends at airport as neither counts as our "closest" airport

Train or  Bus Fare \$\_\_\_\_\_

Accommodations: (Place ✓ in box for accommodations to be used)
 Off Campus Site: \_\_\_\_\_ Cost \$\_\_\_\_\_

On Campus (Staying with: \_\_\_\_\_)

Persons Receiving Accommodations: \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

Complimentary Admissions:

Event: \_\_\_\_\_ Persons Attending \_\_\_\_\_

Date of event: \_\_\_\_\_

Student Host: \_\_\_\_\_ Entertainment Money:  NO  Yes, Amount - \$ \_\_\_\_\_

GWorld Card:  NO  Yes, Amount - \$ \_\_\_\_\_

Entertainment Activity: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

Meals Provided:

Individuals: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Individuals: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Individuals: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Individuals: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Individuals: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Individuals: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_
Compliance Officer's Signature (Pre-Visit)

\_\_\_\_\_ Date \_\_\_\_\_
Head Coach's Signature (Post-Visit)

Cc Manager of Fiscal Operations (pre- and post-visit)
Head Coach (post-visit)