

IPFW Athletic Department

Student-Athlete Employment Form

Student-Athlete Information:

Name:

Sport:

ID:

Email:

Phone:

Employment during (select all that apply):

Academic Year

Official Vacation Period

Summer

Number of credit hours you will be taking during employment:

Is this employment a Fee-For-Lesson?

Yes

No

Is this employment a Camp/Clinic?

Yes

No

If yes for either of the above questions, skip to Section Two or Three and complete respective section. If no, complete Section One.

Coach's Approval:

I give permission for the above Student-Athlete to obtain employment during the indicated time period.

Signature of Coach

Date

Compliance Office Use:

By signing below, I indicate that this employment opportunity meets NCAA requirements.

Signature of Compliance Coordinator

Date

Date Letter Sent to Employer:

Section One:

This section is to be completed if your employment is other than a Fee-For-Lesson or a Camp/Clinic.

Employer Information:

Company Name:

Phone:

Address (Street, City, State, Zip):

Title and Job Description:

Supervisor's Name:

Title:

Phone:

Email:

Dates of Employment: From: To:

How will you be paid (select all that apply):

Cash Check Tips

Wages/Salary: Hours/Week:

Other Employment Benefits (check all that apply):

No Other Benefits Uniform Meals Transportation

Are these benefits provided to all employees? Yes No

Written Statement:

By signing this form, the Student-Athlete and Employer agree that:

- All of the information provided on this form is accurate and if any changes occur to the reported information, the employer will notify the Compliance Office at IPFW immediately;
- The Student-Athlete is not being employed and will not be paid for the publicity, reputation, fame, or personal following that the Student-Athlete has obtained due to their athletic ability;
- The Student-Athlete's name or image will not be used to promote the employer's business;
- The Student-Athlete will be compensated only for the work they actually perform;
- The Student-Athlete is being compensated at a rate that is commensurate with going rate in the employer's area for similar services; and
- The employer and the Student-Athlete authorize release of his or her employment records to IPFW's Compliance Office in the event of an inquiry.

Signature of Student-Athlete

Date

Signature of Employer

Date

Section Two Part A:

Complete this section if you are giving a Fee-For-Lesson.

Fee-For-Lesson:

Lesson Requested By: Anticipated # of Lessons:

Date Range for Lessons:

Location (IPFW facilities may not be used):

Is a fee or membership required to use this facility? Yes No

If yes, who will pay the fee? Student-Athlete Lesson Recipient Other

If other, state Name/Relationship to Lesson Recipient:

Confirmed Going Rate for this Lesson:

Lesson Recipient: How did you learn about the availability of lessons from this Student-Athlete?

Will any other person(s) be receiving a lesson at the same time? Yes No

If yes, please list recipient's name(s), amount being paid, name of fee-payer, and relationship to lesson recipient (attach separate list if necessary):

Written Statement:

By signing this form, the Student-Athlete and the employer (lesson-recipient) agree that:

- All of the information provided on this form is accurate and if any changes occur to the reported information, the employer will notify the Compliance Office at IPFW immediately.
- The student-athlete will not be paid for the publicity, reputation, fame or personal following that the student-athlete has obtained due to their athletic ability.
- The student-athlete may not use his/her name, picture, or image to promote or advertise the availability of lessons.
- The student-athlete is being compensated at a rate that is commensurate with the going rate in the area for similar services and they are being compensated only for work actually performed.
- The student-athlete and employer will abide by NCAA Bylaw 12.4.2.1, which specifies: Playing lessons will not be permitted (e.g., Golf: Putting lesson is permissible, but a full round of golf is impermissible. Tennis: Serving Techniques are permissible, but playing a tennis match against someone is impermissible.)
- If a group lesson is being conducted, the instruction provided to each individual in the group must be comparable to the instruction that would be provided during a private lesson.
- The student-athlete must keep on file and document with the Compliance Office all lessons and the fees provided from those lessons during any time of the year.

Signature of Student-Athlete

Date

Signature of Lesson Recipient

Date

Section Three:

Complete this section if you will be working a camp or clinic.

Camp/Clinic Employment:

Is this camp an IPFW Institutional Camp: Yes No

If no, Institution governing camp: Sport:

Camp Name: Camp Location:

Start Date: End Date: Wages/Salary:

Supervisor Name/Title: Phone:

Will the Athlete only be lecturing and/or demonstrating skills at the camp/clinic? Yes No

If no, please list additional duties:

Will the Athlete's name, picture or athletics reputation be used to advertise or promote the camp or employer (other than the use of name or picture in Camp Counselor section)? Yes No

Will any of the advertisements include a reference to the student-athlete? Yes No

Will any other benefits be provided as a part of this student-athlete's employment at the camp/clinic (please check all boxes that apply)?

Uniform Meals Transportation Lodging

Are these benefits provided to all employees at the camp/clinic? Yes No

Will any cash advances be provided to the student-athlete for any reason prior to the camp commencing? Yes No

Written Statement:

By signing below the student-athlete and employer agree that:

- A student-athlete may not participate in organized practice activities during the camp (unless in playing season)
- Compensation must be at a rate commensurate with the going rate for camp or clinic counselors with similar teaching ability and camp/clinic experience.
- A student-athlete may not conduct their own camp.
- Student-athletes may not be compensated when only lecturing/demonstrating at a camp.
- All of the information provided on this form is accurate and if any changes occur the employer will notify the IPFW Compliance Office immediately.
- The student-athlete will be compensated only for the work they actually perform.
- The employer and the student-athlete authorize release of his/her employment records to the IPFW Compliance Office in the event of an inquiry.

Signature of Student-Athlete

Date

Signature of Employer

Date