

IPFW Athletic Department

Student-Athlete Employment Form: Regular Employment

Student-Athlete Information:

Name: Sport:
ID: Email: Phone:
Employment during (check all that apply): Academic Year Official Vacation Period Summer

Coach's Approval:

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

Signature of Coach

Date

Compliance Approval:

I indicate that this employment opportunity meets NCAA requirements.

Signature of Compliance Coordinator

Date

Employer Information:

Company Name: Phone:
Address (Street, City, State, Zip):
Title and Job Description:
Supervisor: Title: Email:
Dates of Employment: From: To:
Wages/Salary: Other Compensation (tips): Hours/Week:
Other Employment Benefits (check all that apply): None Uniform Meals Transportation
Are these benefits provided to all employees? Yes No

Written Statement:

By signing below, the Student-Athlete and Employer agree to the following:

- 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 the going rate in the employer's area for similar services; and
- The employer and Student-Athlete authorize release of employment records to IPFW's Compliance Office in the event of an inquiry.

Signature of Student-Athlete

Date

Signature of Employer

Date