



GEORGIA TECH COMPLIANCE OFFICE

Student-Athlete Employment Forms: On and Off-Campus

Student-Athletes: Please complete and return page one of this form to the Compliance Office **prior** to your first day of work. Additionally, provide your employer with page two to complete and fax (404.894.4265) to the Compliance Office. Please note that page two must be returned to the Compliance Office **prior** to your first day of work.

Student-Athlete's Name: _____ **Sport:** _____
GTID #: _____ **Semester:** _____ **Year:** _____

I certify that I am a full-time student-athlete at Georgia Tech and to the best of my knowledge I am eligible to be employed. I agree to comply with all the rules and regulations of the Institute, ACC and the NCAA. I understand that I will be permitted to earn legitimate on or off-campus employment income. I further certify that I have read and understand the following:

- I understand that I may not receive any compensation for the value that I may have for the employer because of or based on the reputation, fame or personal following I have obtained because of athletic ability;
- I understand that I am to be compensated only for work actually performed; and
- I understand that I am to be compensated at a rate commensurate with the going rate in that locality for similar services.
- I understand that violation of these rules and failure to report employment may affect my eligibility to compete in intercollegiate athletics at Georgia Tech.

Student-Athlete's Signature **Date**

Employment Information

Employer: _____ Job Title: _____
Address: _____ City: _____ State: _____ Zip: _____
Date Employment Begins: _____ Date Employment Ends: _____
Hourly/Weekly Rate: \$ _____ Approximate Hours of Work per Week: _____
How did you obtain this job: _____
Did you obtain employment assistance from All-American Resources or other professional consultants: Yes ___ No ___

Approval Signatures

Approval of Head Coach

I agree to allow the student-athlete to be employed.

Head Coach's Signature **Date**

Approval of Academic Counselor

The student-athlete is academically eligible to compete and has a cumulative G.P.A of 2.0 or better.

Academic Advisor **Date**

Approval of Compliance

I agree to allow the student-athlete to be employed.

Compliance Signature **Date**



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Employer: Please complete and return this form to the Georgia Tech Athletic Association Compliance Office. We welcome and encourage you to contact the Compliance Office with any questions you may have surrounding the employment or internship of the Georgia Tech Student-Athlete.

Contact Information:

Company Name: _____ Contact Person: _____

Title: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____ Student-Athlete Employed: _____

Please briefly describe the student’s job responsibilities: _____

Affirmation of NCAA Rules Compliance

Compensation of Student-Athletes

Student-Athletes are not restricted on the amount of compensation they may receive provided:

- The student-athlete does not receive any compensation for the value that the student-athlete may have for the employer because of or based on the reputation, fame or personal following the student-athlete has obtained because of athletics ability;
- The student-athlete is compensated only for work actually performed; and
- The student-athlete is compensated at a rate commensurate with the going rate in that locality for similar services.

I, the undersigned, hereby verify that the student-athlete(s) employed by this organization are in position(s) consistent with the rules and regulations governed by the NCAA. I understand that it is my responsibility to report any violations under NCAA rules of which I am aware. I certify that the information that I have given on this document is true and complete to the best of my knowledge. I understand that providing false or misleading information may jeopardize the student-athlete(s) eligibility for practice, competition and athletically related financial aid.

Employer Signature

Date

Once completed, please return this form to the Georgia Tech Athletic Association Compliance Office:

150 Bobby Dodd Way, NW
Atlanta, Georgia 30332
Fax (404)894.894.4265
compliance@athletics.gatech.edu