



Approval of Occasional Meal Form

Please fill out this form and return to the Director of Compliance

In accordance with NCAA Bylaw 16.12.1.5, a student-athlete or an entire team may receive an occasional meal in the locale of the institution on infrequent and special occasions from an institutional staff member. In addition, a student-athlete (or team) may receive an occasional family home meal from a representative of athletics interests on infrequent and special occasions under the following conditions:

- The meal must be provided in an individual’s home (as opposed to a restaurant) and may be catered; and
- A representative of the institution’s athletics interest may provide reasonable local transportation to student-athletes to attend the meal function only if the meal function is at the home of that representative.

There are two concerns with hosting an occasional home meal – the involvement of recruits and boosters. It is permissible to have an occasional home meal in conjunction with an official visit, but not if the meal is being held at the house of a representative of athletics interest. Likewise, it is permissible for a representative of athletics interest to host an occasional home meal, but recruits may not be present.

By completing this form, the parties involved have obtained permission to host the occasional meal and agree to conform to the aforementioned regulations regarding NCAA Bylaw 16.12.1.5 and occasional meals provided to student-athletes. Be sure to include **all** who attended the meal. Attach an additional page if necessary.

General Information

Host of Occasional Meal _____
Date of Meal

Location of Occasional Meal _____
Miles from Campus

Attendee(s) of Occasional Meal (List sport if entire team is attending)

Transportation for Student-Athletes

Other Attendees (attach additional pages if necessary)

Name (relationship) _____
Name (relationship)

Name (relationship) _____
Name (relationship)

Required Signatures

Host of Occasional Meal Signature _____
Date

Head Coach Signature _____
Date

Director of Compliance Signature _____
Date