

Columbia University

In the City of New York
Department of Intercollegiate Athletics and Physical Education

TEAM ROSTER CHANGE OF STATUS FORM

ADD to (Sport)_____ **REMOVE** from (Sport)_____

Name of student athlete:_____ **Year:** First-year Sophomore Junior Senior

Social security # of student-athlete:_____ **School:** BC CC EN GS

E-mail:_____ **Recruited:** Yes No **Transfer:** Yes No

ROSTER ADDITION

Practice start date of student-athlete being added to roster:_____

Is the student-athlete a certified qualifier by the NCAA Clearinghouse? (circle one) Yes No

ROSTER REMOVAL

Reason for student-athlete removal from roster:

	Yes	No
Injury		
Lack of playing time		
Academic Interests		
Other interests*		
Conflict with coach*		
Cut from team*		

Practice start date:_____ Practice end date:_____

Did the former student-athlete compete against any outside competition this academic year, including scrimmages? (circle one) Yes No

Date of first competition: _____ vs: _____

Comments: _____

*please provide written explanation

Name of Coach requesting Status Change:_____

Print

Signature

Date form is being submitted to Compliance Office:_____

For Compliance Office Use Only

UPDATES	DATE	INITIAL	NOTIFICATIONS	DATE	INITIAL
Student Information System (SIS)			Athletics Communication		
Departmental Database			Sports Program Administrator		
Squad List (if applicable)			Sports Medicine		
Update E-Mail Lists			Academic Advisor		