

North Carolina State University
Occasional Meal Form

This form must be completed and filed in the Compliance Office PRIOR to every occasional meal.

1. Which student-athletes will be in attendance at this occasional meal?
Entire Team? Yes / No (*circle one*)
If no, please list those in attendance: (*an extra sheet may be attached*)

2. Other than enrolled student-athletes, who will be in attendance? (*coaches, boosters, etc.*)

3. Who is paying for the meal, and what is their relationship to the university?

4. Where and when is the occasional meal going to occur?

5. What is the specific occasion for which the meal is taking place?

6. By what means of transportation will the student-athletes arrive at the location of the meal, and who will provide transportation?

Name of person submitting form: _____

Signature of Head Coach: _____ Date: _____

Compliance Office Use Only:

Date received in Compliance Office: _____

Approved by: _____