



NCSU Student-Athlete Employment Monitoring

Name of student-athlete: _____ Sport: _____

Phone: _____

I was employed during: _____ the academic year; _____ vacation periods

Employer: _____ Job Title: _____

Contact Person: _____ Phone: _____

Address: _____
Street City State Zip

Dates of employment: Start: _____ End: _____

Pay: Hourly: _____ or Weekly: _____ Approximate Hours/week: _____

Brief Description of your Job Responsibilities: _____

I will be paid by: _____ Check; _____ Cash; _____ Tips; _____ Commission

By signing this statement, the student-athlete and employer agree that:

- ✓ The student-athlete may not receive any remuneration for the value or utility that the student-athlete may have for the employer because of the publicity, reputation, fame or personal following he/she has obtained because of athletics ability;
- ✓ The student-athlete is to be compensated only for work actually performed;
- ✓ The student-athlete is to be compensated at a rate commensurate with the going rate in that locality for similar services; and,
- ✓ The employer and student-athlete authorize the release of his/her employment records to the Compliance Office and to the NCAA or ACC in the event of an inquiry.

Signature of Student-Athlete Date

Signature of Employer Date

Signature of Coach Date

Signature of Compliance Date

Please return to: NCSU Compliance Office, NCSU, Campus Box 8502, Weisiger-Brown Athletic Facility, Raleigh, NC 27695; Fax: 919-515-6306; Phone 919-513-1676