The conditions that you must meet to be eligible and the requirement that you sign this form are indicated in the following articles and regulations of the Division III Manual, and my director of athletics (or his or her designee) provided me with an opportunity to ask questions about those materials. My current institution identified above has provided me with a copy of the Summary of NCAA Regulations, or another similar outline or summary of NCAA regulations, in each case in the form provided to you by your director of athletics. You are responsible for knowing and understanding the application of the Division III regulations as they relate to your eligibility to participate in intercollegiate athletics.

Bylaw 14.1.3.1 provides that a failure to complete and sign the annual eligibility statement shall result in the student-athlete’s ineligibility for participation in all intercollegiate competition. Accordingly, you must legibly complete the information above and sign all parts below in order to be eligible to participate in intercollegiate competition under the Association’s governing legislation. This is the annual form prescribed by the Management Council and it includes the following ten parts:

I. General Statement Concerning Eligibility
II. FERPA/HIPAA Consent
III. Amateurism
IV. Drug Tests
V. Sports Wagering
VI. Academic Eligibility Information (Freshman Only)
VII. Other Prior Violations
VIII. Information Pertaining to Future Transfer
IX. Termination/Survivability of Student-Athlete Statement
X. Student-Athlete Signature

Before you sign this form, you should read the eligibility provisions of the NCAA Division III Manual or the Summary of NCAA Regulations, or another similar outline or summary of NCAA regulations, in each case in the form provided to you by your director of athletics. You are responsible for knowing and understanding the application of all NCAA Division III regulations related to your eligibility. If you have any questions, you should discuss them with your director of athletics.

The conditions that you must meet to be eligible and the requirement that you sign this form are indicated in the following articles and regulations of the Division III Manual: NCAA Bylaws 10 (Ethical Conduct), 12 (Amateurism), 13 (Recruiting), 14 (Eligibility), 15 (Financial Aid), 16 (Awards, Benefits, Expenses), 18.4 (Championship Eligibility) and 31.2.3 (Banned Substances).

If you have questions you may contact the NCAA directly at 317-917-6222.

I understand that certain of my health-related information is protected by the Health Insurance Portability and Accountability Act of 1996 as the same may be amended from time to time (HIPAA) and may not be released without my consent. I agree that my current institution identified above, and any of its physicians, athletic trainers and other agents, as well as any health care organizations and medical personnel that may be working with it or providing services on its behalf, may disclose my Protected Health Information, as that term is defined in 45 C.F.R §160.103, to the NCAA and its authorized agents and representatives to the extent such information pertains to my participation in collegiate athletics including, without limitation, any information regarding any injury, illness or any diagnosis, or any treatment or management of any injury or illness, related to or affecting my training for and participation in intercollegiate athletics, for the sole purpose of evaluating, determining and/or confirming my eligibility for any aspect of participation in NCAA intercollegiate athletics and related programs.

3. Voluntary FERPA/HIPAA Consent (Check One/Both of the First Two Boxes OR the Third Box Below).

Optional Disclosure for Awards and Recognition Purposes. In addition to my FERPA/HIPAA consents to disclosure above which are required for eligibility purposes, and which are limited in scope to purposes related to my eligibility for participation in collegiate athletics, I agree that my current institution identified above may disclose the education records information described in items 1(a)-(k) above and any other documents or information related thereto, to its conference (if any), the NCAA, and their respective authorized agents solely for the purpose of permitting those authorized recipients to evaluate, determine and/or confirm evidence that may support certain conference and/or NCAA awards and other recognition.

Optional Disclosure for Research Purposes. In addition to my FERPA/HIPAA consents to disclosure above which are required for eligibility purposes, and which are limited in scope to purposes related to my eligibility for participation in collegiate athletics, I agree that my current institution identified above and any of its physicians, athletic trainers and other agents, as well as any health care organizations and medical personnel that may be working with it or providing services on its behalf, may disclose my injury/illness and participation information associated with my training and participation in intercollegiate athletics to the NCAA and to its Injury Surveillance Program (ISP), agents and employees for the sole purpose of conducting research into the reduction of athletics injuries.

OR

No Additional Consent to Disclosure. I do not consent to any disclosure other than for the purposes described in Sections 1 and 2 above. I understand that no additional consent is required for purposes of maintaining my eligibility or for receipt of or payment for institutional medical treatment, or enrollment in or receipt of benefits under any institutional health or benefit plan, as the same may be applicable.

4. Institutional Disclosure of Deidentified Information. I understand and agree that, while not subject to FERPA or HIPAA, certain portions of my education record data and information may be disclosed by my current institution identified above on a deidentified basis to the NCAA in connection with, among other things, longitudinal research studies and compliance activities.

5. Subsequent NCAA Disclosure.

I acknowledge and understand that the NCAA may further disclose the information that it properly receives pursuant to the consents set forth in this Part II including, among other things, information regarding any NCAA reinstatement, infractions or waiver matter in which I may become involved while I am a student-athlete, to the media, its committee members or any other third party: (a) for the purpose of evaluating, determining and/or confirming my eligibility for any aspect of participation in NCAA intercollegiate athletics and related programs; (b) to confirm, or correct any inaccuracy in, any statement reported publicly and related to any such matter; (c) with respect to any information it receives pursuant to Section 3 above, to recognize my selection for an NCAA-administered award (e.g., Elite 90); (d) without identifying me by name, to the extent required by NCAA regulations, policies or procedures; or (e) as may otherwise be required by law.

PART III: AMATEURISM.

1. Future Violations.

I affirm that I have read and understand the NCAA amateurism rules and I agree that I will promptly report to the director of athletics of my current institution identified above any violation of any such rule that occurs at any time after I sign this statement and while I am a student-athlete at the identified institution.

2. Historical Violations (Check One Box Below).

No violation. I affirm that to the best of my knowledge I have not violated any NCAA amateurism rules; and have not provided false or misleading information concerning my amateur status to the NCAA or my current institution identified above or any person working for or on behalf of those organizations.

Prior Violation. I am disclosing that I have violated one or more NCAA amateurism rules and/or have provided false or misleading information concerning my amateur status to the NCAA or my current institution identified above or one or more persons working for or on behalf of those organizations and I have reported or will promptly report the details related to such violation(s) to the director of athletics at my current institution identified above including, along with any other related information requested by the institution, the date(s) and nature of those violation(s) and the identity of those organizations and individuals who were involved.

PART IV: DRUG TESTS.

1. Future Positive Drug Test Results.

I am aware of the NCAA drug-testing program. I have read and understand the related eligibility requirements and restrictions and I have signed the 2020-21 Drug-Testing Consent Form (Form 20-3f). I agree that I will report my results and/or actions to the director of athletics of my current institution identified above in the event that I, at any time after I sign this statement and while I am a student-athlete at the identified institution: (a) test positive as part of any drug test administered by the NCAA, my current institution identified above or any of their respective authorized agents or representatives, and/or by or at the direction of any non-NCAA athletics organization or national or international athletics governing body; or (b) fail to appear for any scheduled drug test, or otherwise violate the drug-testing protocol, of any of these parties.

2. Historical Drug Test Results (Check One Box Below).

No positive drug test. I affirm that I have never: (a) tested positive as part of any drug test administered by the NCAA, my current institution identified above or any of their respective authorized agents or representatives, or by or at the direction of any non-NCAA athletics organization or national or international athletics governing body; or (b) failed to appear for a scheduled drug test, or otherwise violated the drug-testing protocol, of any of these parties.
PART V: SPORTS WAGERING.

1. Future Sports Wagering Activity.

I affirm that I have read and understand the NCAA sports wagering rules and I agree that if I violate the sports wagering rules of the NCAA and/or any non-NCAA national or international athletics governing body at any time after I sign this statement while I am still a student-athlete at my current institution identified above I will promptly report this information to the director of athletics at the identified institution.

2. Historical Sports Wagering Suspension (Check One Box Below).

☐ No Sports Wagering-Related Suspension. I affirm that I have never been subject to any suspension related to a violation of any NCAA and/or non-NCAA national or international athletics governing body sports wagering rules.

OR

☐ Sports Wagering-Related Suspension. I have been subject to a suspension related to a violation of NCAA and/or non-NCAA national or international athletics governing body sports wagering rules and I have reported or will promptly report details of the testing and results of my current institution identified above including, along with any other related information requested by the institution:

- the suspending institution(s)/organization(s)
- the sport(s) wagered on and date(s)/location(s) of wagering activity
- the details and finding(s) of any appeal(s)
- the fact that the suspension(s) are still in effect
- the start and end date(s) and current status of suspension(s)

PART VI: ACADEMIC ELIGIBILITY INFORMATION (Freshman Only).

I affirm that, to the best of my knowledge, all information provided to my current institution identified above by me or on my behalf and related to my academic eligibility including, without limitation, information pertaining to test scores, high school attendance, completion of coursework and high school grades, is complete, valid and accurate.

PART VII: OTHER PRIOR VIOLATIONS (Check One Box Below).

☐ Other than any violations that I have disclosed above in this form, or in a previous Student-Athlete Annual Statement form that I signed and delivered to my current institution identified above in a prior academic year, I am not aware that I have been involved at any time in any NCAA violations.

OR

☐ In addition any NCAA violations that I have disclosed above in this form, or in a previous Student-Athlete Annual Statement form that I signed and delivered to my current institution identified above in a prior academic year, I am aware that I have been involved with one or more other NCAA violations and I have reported or will promptly report the details related to such violation(s) to my current institution identified above including, along with any other related information requested by the institution:

- the date(s) and nature of those violation(s)
- copies of any communications or other documents or materials related to the violation(s)
- the start and end date(s) and current status of any related NCAA or institutional investigation
- the effective date and details pertaining to any resulting NCAA or institutional suspension or other penalty

PART VIII: INFORMATION PERTAINING TO FUTURE TRANSFER.

I consent and agree to disclose to authorized representatives of my current institution identified above any documents or information pertaining to my NCAA transfer eligibility and to allow authorized representative(s) of that institution to disclose my transfer status, the information in this form and any other information that may be part of my education records pertaining to my NCAA transfer eligibility to its conference (if any), the NCAA, other NCAA member institutions and their respective authorized agents or representatives, and/or by or at the direction of any non-NCAA athletics organization or national or international athletics governing body; and/or (b) failed to appear for a schedule drug test, or otherwise violated the drug-testing protocol, of one or more of these parties. I have reported or will promptly report the details of the testing and results of my current institution identified above including, along with any other related information requested by the institution:

- The date(s) of such test(s)
- The testing institution(s)/organization(s)
- The substance(s) detected
- The details and finding(s) of any retest(s) or appeal(s)
- The start and end date(s) and current status of any resulting suspension

PART IX: TERMINATION/SURVIVABILITY OF STUDENT-ATHLETE STATEMENT.

I understand that I may for any or no reason, by providing written notice of the same to the director of athletics at my current institution identified above, voluntarily terminate the effectiveness of this Student-Athlete Statement and, relatedly, all of the agreements, consents and other representations contained in this form, with the understanding that any termination under this Part IX will automatically and simultaneously terminate my eligibility to participate in NCAA collegiate athletics. Any termination attempted under this Part IX will be effective upon the receipt of the required notice by the identified institution’s director of athletics.

NOTE: Notwithstanding anything to the contrary in this Statement, I agree that my consents and other representations described in Sections 1, 2 and 5 of Part II above will, solely for the purposes described in those Sections, survive and remain effective even after any termination or expiration of this Student-Athlete Statement.

PART X: STUDENT-ATHLETE SIGNATURE.

I agree that I have had an adequate opportunity to read the entire content of this Student-Athlete Statement and to discuss the same and any questions I have with my director of athletics and other/or other advisors and my signature below reflects my understanding of and agreement with the same.

Signature of student-athlete

Date

Signature of parent or legal guardian (if student-athlete is a minor)

Date
For: Student-athletes.
Action: Sign and return to your director of athletics.
Due date: Before your institution's first competition.
Required by: NCAA Constitution 3.2.4.6 and NCAA Division III Bylaw 14.1.4.
Purpose: To assist in certifying eligibility.
Effective date: This consent form shall be effective from the date this document is signed and shall remain effective until a subsequent Drug-Testing Consent Form is executed.

Requirement to Sign Drug-Testing Consent Form.
Name of student-athlete: ____________________________________________   Sport(s): __________________________
You must sign this form prior to competition in intercollegiate athletics per Constitution 3.2.4.6 and Bylaw 14.1.4. If you have any questions, you should discuss them with your director of athletics.

Consent to Testing.
You agree to allow the NCAA to test you in relation to any participation by you in any NCAA championship and in any postseason football game for drugs in the banned drug classes listed in Bylaw 31.2.3.1 (see attached). Examples of drugs in each class can be found at www.ncaa.org/drugtesting. Note: There is no complete list of banned substances. Check Drug Free Sport AXIS at 877-202-0769 or www.dfsaxis.com (Organization: NCAA Division III; password: ncaa3) for questions about supplements, medications and banned drugs.

Consequences for a Positive Drug Test.
By signing this form, you affirm that you are aware of the NCAA drug-testing program, which provides:

1. A student-athlete who tests positive for an NCAA banned drug will be declared ineligible (unless a medical exception is granted);
2. A student-athlete who tests positive for the use of a substance in a banned drug class other than cannabinoids and narcotics shall be withheld from competition in all sports for 365 days from the date of the test and shall lose a year of eligibility. A student-athlete who tests positive for the use of a substance in the banned drug classes cannabinoids or narcotics shall be immediately declared ineligible and be withheld from competition for the next 50 percent of a season in all sports (50 percent of all contests or dates of competition in the season following the positive test);
3. A student-athlete who tests positive has an opportunity to appeal the sanction;
4. A student-athlete who tests positive a second time for the use of any substance in a banned drug class other than cannabinoids and narcotics shall lose all remaining regular season and postseason eligibility in all sports. A student-athlete who tests positive a second time for the use of a substance in the drug classes cannabinoids or narcotics shall be withheld from competition for 365 days from the date of the test and shall lose a year of eligibility. A student-athlete who tests positive for the use of a substance in the drug classes cannabinoids and narcotics for the first time after having tested positive for the use of any substance in a banned drug other than cannabinoids and narcotics shall be ineligible for competition for 50 percent of a season in all sports (the first 50 percent of regular season contests or dates of competition in the season following the positive test);
5. The penalty for missing a scheduled drug test is the same as the penalty for testing positive for the use of a substance in a banned drug class other than cannabinoids and narcotics;
6. A student-athlete who tests positive a second time for the use of a substance in a banned drug class other than cannabinoids and narcotics shall be immediately declared ineligible and be withheld from competition for the next 50 percent of a season in all sports (50 percent of all contests or dates of competition in the season following the positive test);
7. A student-athlete who is found to have tampered with an NCAA drug test sample shall be declared ineligible for all regular season and postseason competition during the time period ending two calendar years (i.e., 730 days) from the date of the test; and
8. If a student-athlete transfers to a non-NCAA institution while ineligible because of a positive NCAA drug test and competes in collegiate competition within the prescribed penalty at a non-NCAA institution, the student-athlete will be ineligible for all NCAA regular season and postseason competition until the student-athlete does not compete in collegiate competition for the entirety of the prescribed penalty.

Signatures.
By signing below, I consent:

1. To be tested by the NCAA in accordance with NCAA drug-testing policy, which provides among other things that:
   a. I will be notified of selection to be tested;
   b. I must appear for NCAA testing or be sanctioned for a positive drug test; and
   c. My urine sample collection will be observed by a person of my same gender;
2. To accept the consequences of a positive drug test or a breach of drug testing protocol;
3. To allow my drug test sample to be used by the NCAA drug testing laboratories for research purposes to improve drug testing detection; and
4. To allow disclosure of my drug testing results only for purposes related to eligibility for participation in NCAA competition.

I understand that if I sign this statement falsely or erroneously, I violate NCAA legislation on ethical conduct and will jeopardize my eligibility.

Date __________________________________________ Signature of student-athlete
Date __________________________________________ Signature of parent (if student-athlete is a minor)
Name (please print) __________________________________________ Date of birth __________ Age __________
Home address (street, city, state and zip code) __________________________________________
What to do with this form: Sign and return it to your director of athletics before your institution's first competition. This form is to be kept at the institution for six years.

Any questions regarding this form should be referred to your director of athletics or your institution’s NCAA compliance staff or you may contact the NCAA directly at 317-917-6222.

2020-21 NCAA Banned Substances

NCAA Division I Bylaw 12 and NCAA Divisions II and III Bylaw 14 require that schools provide drug education to all student-athletes. The athletics director or athletics director's designee shall disseminate the list of banned-drug classes to all student-athletes and educate them about products that might contain banned drugs. All student-athletes are to be notified the list may change during the academic year and that updates may be found on the NCAA website (ncaa.org) and informed of the appropriate athletics department procedures for disseminating updates to the list. It is the student-athlete's responsibility to check with the appropriate or designated athletics staff before using any substance.

The NCAA bans the following drug classes:

1. Stimulants.
2. Anabolic agents.
3. Alcohol and beta blockers (banned for rifle only).
4. Diuretics and masking agents.
5. Narcotics.
7. Peptide hormones, growth factors, related substances and mimetics.
8. Hormone and metabolic modulators.

Note: Any substance chemically/pharmacologically related to all classes listed above and with no current approval by any governmental regulatory health authority for human therapeutic use (e.g., drugs under pre-clinical or clinical development or discontinued, designer drugs, substances approved only for veterinary use) is also banned. The institution and the student-athlete shall be held accountable for all drugs within the banned-drug class regardless of whether they have been specifically identified. Examples of substances under each class can be found at ncaa.org/drugtesting. There is no complete list of banned substances.

Substances and Methods Subject to Restrictions:

2. Local anesthetics (permitted under some conditions).
3. Manipulation of urine samples.
4. Beta-2 agonists (permitted only by inhalation with prescription).
5. Tampering of urine samples.

NCAA Nutritional/Dietary Supplements:

Before consuming any nutritional/dietary supplement product, review the product and its label with your athletics department staff. Many nutritional/dietary supplements are contaminated with banned substances not listed on the label.

1. Nutritional/dietary supplements, including vitamins and minerals, are not well-regulated and may cause a positive drug test.
2. Student-athletes have tested positive and lost their eligibility using nutritional/dietary supplements.
3. Any product containing a nutritional/dietary supplement ingredient is taken at your own risk.

Athletics department staff should provide guidance to student-athletes about supplement use, including a directive to have any product checked by qualified staff members before consuming. The NCAA subscribes only to Drug Free Sport AXIS™ for authoritative review of label ingredients in medications and nutritional/dietary supplements. Contact the Drug Free Sport AXIS at 877-202-0769 or dfsaxis.com (password ncaa1, ncaa2 or ncaa3)
There is no complete list of banned substances. Do not rely on this list to rule out any label ingredient.

<table>
<thead>
<tr>
<th>Drug Classes</th>
<th>Some Examples of Substances in Each Class</th>
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</thead>
<tbody>
<tr>
<td>Stimulants</td>
<td>Amphetamine (Adderall)</td>
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<tr>
<td></td>
<td>Caffeine (Guarana)</td>
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<tr>
<td></td>
<td>Cocaine</td>
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<td></td>
<td>Dimethylbutylamine (DMBA; AMP)</td>
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<tr>
<td></td>
<td>Dimethylhexylamine (DMHA; Octodrine)</td>
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<tr>
<td></td>
<td>Ephedrine</td>
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<td>Ephedrine</td>
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<td>Ephedrine</td>
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<td></td>
<td>Ephedrine</td>
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<tr>
<td></td>
<td>Methamphetamine</td>
</tr>
<tr>
<td>Exceptions:</td>
<td>Phencyclidine and Pseudoephedrine are not banned</td>
</tr>
<tr>
<td>Anabolic Agents</td>
<td>Androstenedione</td>
</tr>
<tr>
<td></td>
<td>Boldenone</td>
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<tr>
<td></td>
<td>Clenbuterol</td>
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<td></td>
<td>DHEA (7-Keto)</td>
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<tr>
<td></td>
<td>Drostanolone</td>
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<tr>
<td></td>
<td>Epitrenbolone</td>
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<tr>
<td></td>
<td>Eriocholanolone</td>
</tr>
<tr>
<td></td>
<td>Methandienone</td>
</tr>
<tr>
<td>Exceptions:</td>
<td>Finasteride is not banned</td>
</tr>
<tr>
<td>Alcohol and Beta</td>
<td>Alcohol</td>
</tr>
<tr>
<td>Blockers</td>
<td>Alcohol</td>
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<tr>
<td>(banned for rifle</td>
<td>Atenolol</td>
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<tr>
<td>only)</td>
<td>Metoprolol</td>
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<tr>
<td></td>
<td>Nadolol</td>
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<tr>
<td>Diuretics and</td>
<td>Bumetanide</td>
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<tr>
<td>Masking Agents</td>
<td>Chlorothiazide</td>
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<tr>
<td></td>
<td>Furosemide</td>
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<tr>
<td></td>
<td>Hydrochlorothiazide</td>
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<tr>
<td>Exceptions:</td>
<td>Finasteride is not banned</td>
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<tr>
<td>Narcotics</td>
<td>Buprenorphine</td>
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<tr>
<td></td>
<td>Dextromoramide</td>
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<td></td>
<td>Diamorphine (heroin)</td>
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<tr>
<td></td>
<td>Fentanyl, and its derivatives</td>
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<tr>
<td></td>
<td>Hydrocodone</td>
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<td></td>
<td>Hydromorphone</td>
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<td></td>
<td>Methadone</td>
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<tr>
<td>Cannabinoids</td>
<td>Marijuana</td>
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<td></td>
<td>Synthetic cannabinoids (Spice; K#2; JWH-018; JWH-073)</td>
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<tr>
<td></td>
<td>Tetrhydrocannabinol (THC)</td>
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<tr>
<td>Peptide Hormones,</td>
<td>Growth hormone (hGH)</td>
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<tr>
<td>growth factors,</td>
<td>Human Chorionic Gonadotropin (hCG)</td>
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<tr>
<td>related substances</td>
<td>Erythropoietin (EPO)</td>
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<td>and mimetics</td>
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<tr>
<td>Exceptions:</td>
<td>Insulin, Synthroid and Forteo are not banned</td>
</tr>
<tr>
<td>Hormone and</td>
<td>Aromatase Inhibitors [Anastrazole (Arimidex); ATD (androstatrienedione); Formestane; Letrozole]</td>
</tr>
<tr>
<td>Metabolic</td>
<td>Clomiphene (Clomid)</td>
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<tr>
<td>Modulators</td>
<td>Fulvestrant</td>
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<tr>
<td></td>
<td>GW1516 (Cardarine; Endurobol)</td>
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<tr>
<td></td>
<td>SERMS [Raloxifene (Evista); Tamoxifen (Nolvadex)]</td>
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<tr>
<td>Beta-2 Agonists</td>
<td>Bambuterol</td>
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<td></td>
<td>Formoterol</td>
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<td></td>
<td>Higenamine</td>
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<td></td>
<td>Norocluaaine</td>
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<td></td>
<td>Salbutamol</td>
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<td></td>
<td>Salmeterol</td>
</tr>
</tbody>
</table>

Any substance that is chemically related to one of the above classes, even if it is not listed as an example, is also banned.

It is your responsibility to check with the appropriate or designated athletics staff before using any substance. Many nutritional/dietary supplements are contaminated with banned substances not listed on the label.

Information about ingredients in medications and nutritional/dietary supplements can be obtained by contacting Drug Free Sport AXIS at 877-202-0769 or dfsaxis.com (password ncaa1, ncaa2 or ncaa3).