

Form 17-MDYR2 (NonFBS)

Annual Report - Multidivision Classification - Year Two

For: Directors of Athletics and Chancellors/Presidents.

Action: E-mail completed form (with required signatures) and requested

attachments (one single pdf document please) to

smallonee@ncaa.org.

Due date: June 1, 2017.

Required by: NCAA Bylaw 20.4.1.1.3.2

Purpose: To assist institution in transitioning a sport to Division I status.

Part I: General Information
Institution:
Sport:
Other Division I Sport:
Conference Affiliations:
Part II: Declaration of Information
This is to confirm that the sport seeking Division I status operated in conformity with a requirements contained in the Division I bylaws listed below (as specified in NCAA Byla 20.4.1.1.2), with the exception of scheduling requirements.
[NOTE: The blank beside each bylaw listed below should be initialed by the institution president/chancellor. This verifies the institution's compliance with each bylaw as stated above
Bylaw 11 (Personnel)
Bylaw 12 (Amateurism)
Bylaw 13 (Recruiting)
Bylaw 14 (Eligibility)
Bylaw 15 (Financial Aid) [Note: Division III institutions reclassifying a single sport to Division I must adhere to Division III Bylaw 15.4.]
Bylaw 16 (Awards and Benefits)
Bylaw 17 (Playing and Practice Seasons)

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Part III: Financial Aid and Sport Sponsorship Requirements

Please attach a signed and completed copy of the 2016-17 financial squad list for the sport seeking Division I status, a financial aid squad list to date for the 2017-18 academic year and schedules for the 2016-17 and 2017-18 seasons.

Part IV: Compliance Review

As required under Bylaw 20.4.1.1.3.3, please attach a copy of the institutions external compliance review and the institution's response to the recommendations made by the entity conducting the external compliance review.

Part V: Signatures

The signature above.	es below confirm and verify the	e accuracy and completeness of the information	
Signed:	(Director of Athletics)	Printed Name:	
Signed:(Fac	culty Athletics Representative)	Printed Name:	
Signed:	Chief Executive Officer)	Printed Name:	

(Please note that each of the signatures above confirms that your institution had abided by and included the appropriate information in accordance with the policies set forth by the NCAA Division I Legislative Committee.)

THIS FORM IS TO BE COMPLETED AND SUBMITTED TO STEVE MALLONEE

(smallonee@ncaa.org) AT NCAA NATIONAL OFFICE VIA

E-MAIL IN A SINGLE BOOKMARKED PDF FORMAT.

PLEASE DO NOT SEND HARDCOPIES. THANK YOU