



**WASHINGTON STATE ATHLETICS  
OFFICE OF COMPLIANCE  
OFFICIAL VISIT APPLICATION**

\*(Please attach all applicable transcripts and test scores)\*

**COACHES:** This form must be completed and approved prior to travel arrangements being made.

Requested by Coach:	Sport:	Date of Request:
Prospect's Name:		Home Phone:
Eligibility Center ID:		Date of Birth:
Name of High School/College:		
City, State of High School/ College:		Student Host Name:
Date(s) of Official Visit ( <b>May NOT Exceed 48 Hours</b> )		
START DATE: _____ END DATE: _____		
<b><u>FOR BASKETBALL ONLY</u></b> Do you plan to conduct an on-campus evaluation? <b>Yes</b> <b>No</b> If yes, the following must be completed: _____ Training room receives a copy of physical within one year of evaluation date _____ Complete Sickie Cell Waiver _____ High School/Two-Year Transfer- Exhausted eligibility at High School or Junior College _____ Four- Year Transfer – Season has completed		
Visit Approved: <b>YES</b> <b>NO</b>	Compliance Signature:	Date:

**OTHERS ACCOMPANYING PROSPECT:**

<b>Name:</b>		<b>Relationship</b> (Parent, Friend, etc.):	
<b>Description</b>	<b>Date</b>	<b>Time</b>	<b>Description/Attendees</b>
Athletic Event			
Athletic Event			
Academic Meeting			
Meeting w/counselor or Acd Dept.			
Other Activity			
Other Activity			
Other Activity			

**Forms:** Official Visit forms must be submitted to the Compliance Office and the Business Office at the conclusion of the Prospective Student-Athlete's visit to Washington State University.

**Compliance Forms:** 1) Official Visit Record 2) Recruit Declaration Form

**Business Forms:** 1) Student Host Form 2) Student Host Expense Form

Coach Signature: _____	Date: _____
Compliance Signature: _____	Date: _____