

REGION XI _____ SQUAD CERTIFICATION

(list sport)

Name of Institution _____

Campus Center _____

CATEGORY A ATHLETES (IN STATE)

CATEGORY B ATHLETES (OUT OF STATE)

| <i>ATHLETE'S NAME</i> | <i>RESIDENCE LOCATION</i> | <i>ATHLETE'S NAME</i> | <i>RESIDENCE LOCATION</i> |
|-----------------------|---------------------------|-----------------------|---------------------------|
| 1. | | 1. | |
| 2. | | 2. | |
| 3. | | 3. | |
| 4. | | 4. | |
| 5. | | 5. | |
| 6. | | 6. | |
| 7. | | 7. | |
| 8. | | 8. | |
| 9. | | 9. | |
| 10. | | 10. | |
| 11. | | 11. | |
| 12. | | 12. | |
| 13. | | 13. | |
| 14. | | 14. | |
| 15. | | 15. | |
| 16. | | 16. | |
| 17. | | 17. | |
| 18. | | 18. | |

CATEGORY A INACTIVE ATHLETES

CATEGORY B INACTIVE ATHLETES

| <i>ATHLETE'S NAME</i> | <i>RESIDENCE LOCATION</i> | <i>ATHLETE'S NAME</i> | <i>RESIDENCE LOCATION</i> |
|-----------------------|---------------------------|-----------------------|---------------------------|
| 1. | | 1. | |
| 2. | | 2. | |
| 3. | | 3. | |
| 4. | | 4. | |
| 5. | | 5. | |
| 6. | | 6. | |
| 7. | | 7. | |
| 8. | | 8. | |
| 9. | | 9. | |
| 10. | | 10. | |
| 11. | | 11. | |
| 12. | | 12. | |
| 13. | | 13. | |
| 14. | | 14. | |
| 15. | | 15. | |
| 16. | | 16. | |
| 17. | | 17. | |
| 18. | | 18. | |

We hereby certify that the above named students are eligible under the Rules of Eligibility of the National Junior College Athletic Association, and have fulfilled all requirements of the State Executive Committee for Area School Athletics, and that only students listed on this form or on subsequent change in squad certification form will represent the institution.

Signature – Coach

Date

Signature – Athletic Director