

# LIPSCOMB ATHLETICS COMPLIANCE PROGRAM OFF-CAMPUS RECRUITING FORM

Sport: \_\_\_\_\_

**PURPOSE:** This form is to be used to track the number of coaches off-campus at any one time, general evaluations of events/teams (when not observing a specific prospect), & evaluation days (for men's & women's basketball, women's volleyball and softball only). **PLEASE USE THIS FORM EVERY TIME YOU MAKE AN OFF-CAMPUS CONTACT OR EVALUATION.**

1. Please indicate the date and write in the names of the coaches that are recruiting off-campus. Remember, **no more than two coaches (three for M & W Basketball only) can be off-campus at any one time and a third coach may not leave campus to recruit until one of the other two coaches returns to campus.**
2. Please indicate whether this is an evaluation or contact.
3. If it's an evaluation, please write the name & location of the event/game that you are attending. Also, indicate the teams that you observe. (Remember, **if you are watching a specific prospect, that also needs to be reported on his/her Individual Recruitment Record.**)

Date	Coaches Names	Evaluation	Contact	Name & Location of Event/Game (participating teams)
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	
		<input type="checkbox"/> Eval.	<input type="checkbox"/> Contact	

\*Please turn in this form every Monday for the current week (DO NOT SIGN THE ORIGINAL – only sign the copy that you turn in each week)

Head Coach's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

