

Consideration of Admission George Mason University

Athlete Name: _____

Sport: _____

Date of Birth: _____

Transfer: 2-Year ____ or 4-Year ____

Date: _____

How many full-time terms completed ____

Compliance Staff Review _____

How many transfer credits needed ____

How many credits needed for % ____?

Special Comments Concerning Student: *(i.e. position, national ranking, importance to Mason team, etc.)*

Intended Signing Date if Admissible: _____

Athletic Scholarship: ____ Yes ____ No

Parent/Legal Guardian In-State _____ Out of State _____

Admissions Office Only

___ Admissible as presented*

___ Admissible with following stipulations: *

___ Will re-review status after the following items have been provided:

___ Prospect is not admissible.

Admissions Officer

Date

***If prospect is deemed admissible, he/she must maintain a current level of academic achievement through graduation and satisfactorily complete any above-mentioned requirements to be formally admitted to the university.**

Received by Coach _____

Date