Purpose: To ensure all student-athletes and athletics staff members receive education on NCAA rules and regulations related to agents/advisors and are aware of the department’s policy regarding athlete agent/advisors.

NCAA Bylaw: 12.3 (Use Of Agents)

Primary Responsibility: Athletics Compliance Office (ACO)

Contacts: Athletics Department Staff
Head Coaches
Student-Athlete

Procedure:

1. Any athlete agent/advisor attempting to contact a Florida International University (FIU) student-athlete must register with the appropriate professional league (e.g., NFLPA), the State Department of Professional Regulation (unless they are a member of the State Bar in good standing), and the FIU Athletics Compliance Office (ACO). Please note the FIU registration requirement applies to athlete agents, financial planners, disability insurance providers or anyone who may function as a representative of the aforementioned titles and “recruit” student-athletes for representation.

2. All agents/advisors desiring to contact FIU student-athletes must complete an agent/advisor registration application. For the purpose of this policy, permissible contact is defined as issuing documentation on services provided by the agent/advisor, an agent/advisor entering FIU campus or FIU Athletics controlled areas, and discussion with a FIU student-athlete after the student-athlete initiated contact.

3. The application must be filled out accurately, completely and include all requested certification information. Providing inaccurate information within the application is grounds for automatic denial of the application. Individuals who submit an incomplete application will be notified of the missing information and the application will not be processed until all requested information has been received. Notification of completed approved applications will be given via e-mail.

4. ACO will verify credentials by contact the appropriate professional league.

5. The approved forms will be kept confidentially on-file inside the ACO. Information on the forms will be made available for interested student-athletes to review inside the ACO only. Approved applicants without major changes in the information provided in their application, maintain their approved status for a cycle beginning October 1st and ending September 30th. Each cycle year (October 1 – September 30) a full and accurately completed application must be filled out and submitted to the FIU Athletic Compliance Office.

6. All approved applicants must notify the FIU ACO of any major changes in their application status within a reasonable time of occurrence. Major changes include but are not limited to an applicant’s registration with the appropriate professional league, the State of Department of Professional Regulation (or State Bar if applicable), or violations of NCAA Bylaws.

7. The FIU ACO will regularly review approved applications for changes of status. Failure to notify the FIU ACO of major changes in the approved application can result in revocation of approved
status. Classification of major changes in an approved application will be determined by the FIU Athletics Compliance Office.

8. In accordance with State of Florida law an athlete **agent/advisor is prohibited from initiating contact with a student-athlete or their family**. If the student-athlete or their family initiates contact the athlete agent/advisor and the contacting student-athlete must give notice to the FIU Athletic Compliance Office within a reasonable time of the contact. FIU strongly discourages its student-athletes from contacting athlete agent/advisors until their eligibility has expired. The University also encourages parents of student-athletes to refrain from having telephone contact or in-person contact with an athlete agent/advisor until the student-athlete’s eligibility has expired. Any written information an athlete agent/advisor would like to provide to a student-athlete may be mailed to the attention of the ACO, which will be reviewed with the specified student athlete.

9. If a current student-athlete wishes to meet with an Agent or Advisor prior to the completion of NCAA eligibility, we require that the student-athlete inform the ACO, and an ACO staff member can be present when the student-athlete meets with the Agent to ensure that NCAA rules are not violated or the student-athletes eligibility jeopardized.

10. If a meeting is arranged, the ACO must be advised to attend and the meeting must take place on the FIU campus.

11. FIU student-athletes are educated each year on the proper procedures to follow when contacted by an athlete agent/advisor or their employee or representative (including runners). Student-athletes and their families have been told to record on a log all athlete agent/advisors who attempt to communicate with them and inform the FIU ACO of the contact.

12. Every athlete agent/advisor and their employees or representatives (including runners), or any other person involved in the representation or potential representation of a FIU student-athlete, must report to a FIU ACO:
   a. Any time he or she enters the FIU campus or any other location under control of the FIU Athletic Department
   b. Attempts contact with any FIU student-athlete at any time or location.

13. **The rules governing contact are always in affect and there will be no exceptions.** Failure to comply with this policy will result in an athlete agent/advisor and their employees or other representatives being issued a FIU campus trespass by the department of public safety for any or all parts of campus.

14. Regardless of the reason, an athlete agent/advisor or their representative must pick up an agent/advisor credential and wear it at all times while on the FIU campus. You may pick up a credential by contacting the Athletic Compliance Office at 305-348-4417 or email at athletic.compliance@fiu.edu.

15. In addition, if a FIU ACO has reasonable belief that an athlete agent/advisor, their employee and/or representative has attempted to contact a FIU student-athlete without following procedures, the violation will be reported to the State Department of Professional Regulation and the police entity having jurisdiction in the area where the alleged violation has taken place. All associated with the violating individual will be trespassed from the FIU campus.

16. If a student-athlete enters into a contract with an athlete agent/advisor they must provide a written notice of the contract to the athletic director or president of the University before the contracting student-athlete’s next practice/participation in any intercollegiate athletic event or within 72 hours after entering into the contract, whichever comes first.

17. Student-athletes have been informed that they may lose their eligibility to compete as a student-athlete if they agree to a contract verbally or in writing for services performed immediately or in the future. They have also been notified that if they enter into a contract they may cancel the contract within 14 days of agreeing to the terms of the contract, however cancellation may not reinstate their eligibility to compete as a student-athlete.

18. There are various prohibitive acts an agent must refrain from doing regarding student-athletes. Florida Session Laws Chapter 88-229 regulates an agent’s activities within the State of Florida (Fla. St. 1995 § 468.51-468.4571). Failure to comply with the FIU, State of Florida, or NCAA
policies could result in criminal prosecution, civil liability and/or an agent/advisor being trespassed from the FIU campus.

19. The State of Florida Legislature finds that dishonest or unscrupulous practices by agents who solicit representation of student-athletes can cause significant harm to student-athletes and the academic institutions for which they attend. It is the intent of the State of Florida Legislature and the University to protect the interests of student-athletes and the University by taking an aggressive proactive approach to regulating the activities of athlete agent/advisors.

20. The Department of Athletics has no intention of creating barriers between our student-athletes and those who may be able to provide valuable services to them. However, in order to allow our student-athletes to focus upon their academic and athletics pursuits as they complete their careers with our athletics program, we stipulate that both our student-athletes and those who desire to represent them adhere to established policies and procedures.
AGENTS, FINANCIAL PLANNERS & DISABILITY INSURANCE PROVIDERS: All agent/advisor registration applications must be filled out completely and include requested certification information. Incomplete applications will be notified of missing information and the application will not be processed until all requested information has been received. You will be notified by e-mail if your application is completed and approved. Approved applicants are valid for a cycle year of 10/1 - 9/30. The FIU Athletics Compliance Office (ACO) must be notified of major changes in an approved applicant’s application. Failure to do so can result in revocation of an approved application.

I. GENERAL

Companies with multiple applicants should complete a form for each person applying

Applicant Name: ____________________________________________

(Last)  (First)  (Middle)

Have you ever been known by any other name or surname (such as a maiden name)? If so, state all names and when used:

________________________________________________________________________

Date of Birth: ____________  SS#: __________________________  Citizenship: __________________________

Home Address: ____________________________________________  City, State, Zip: ____________

Business Name: ____________________________________________  Work Phone: ____________  Cell Phone: ____________

Business Fax: ____________  Email: ____________  Website: ____________

Business Address: ____________________________________________  City, State, Zip: ____________

II. REGISTRATION/CERTIFICATION

Please Check Status Seeking (Select All Applicable)

Athletic Agent or Associate  Financial Planner  Disability Insurance Provider  (Other)

Are you currently registered by the State of Florida Department of Business and Professional Regulation?  Yes  No

If Yes, what is your Florida Registration Number:

Please select all leagues you are certified by below, and list the dates certification was effective and expires:

☐ National Football Players Association  Effective ____________  Expires ____________  Provisional

☐ National Basketball Players Association  Effective ____________  Expires ____________  Provisional

☐ Major League Baseball Players Association

☐ Other:  Effective ____________  Expires ____________  Provisional

☐ Other:  Effective ____________  Expires ____________  Provisional

*Please attach a copy of your certification card(s)

Have you ever been disciplined or cited for a violation of a players’ association regulation governing athlete agents?  Yes  No

If yes, please provide the name of complaint(s); the date of the alleged allegation(s); and result or status of the investigation, Including action taken, and the authority imposing the action below:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
II. REGISTRATION CERTIFICATION (CONTINUED)

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<th>List current membership in any professional organization(s):</th>
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<th>List any occupational or professional licenses (e.g. certified public accountant, charter life underwriter) and dates obtained below:</th>
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Do you have any business associates (e.g., “runners,” marketing associates, etc.)

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<th>No</th>
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If yes, please identify by first and last name and state the service(s) provided:

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III. PROFESSIONAL SERVICES RENDERED

General services performed for client athletes (check all that apply):

- [ ] Playing Contract Negotiations
- [ ] Endorsement Contract Negotiations
- [ ] Legal Assistance
- [ ] Tax Consulting
- [ ] Financial Planning
- [ ] Grievance Arbitration
- [ ] Estate Planning
- [ ] Insurance

For services you perform for client athletes, list names, addresses and phone numbers of individuals, firms or agencies who assist you in providing these services:

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<th>Business Name:</th>
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Do you have an ownership interest, wholly or partially finance, or directly or indirectly exercise control of any firm or organization that provides service for players upon your referral? If yes, please identify the firms, the addresses, and the phone numbers below:

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Explain your billing structure (e.g., “up front”) and include expenses billed to your clients above your standard percentage.
IV. WORK HISTORY

Names of any clients you previously or currently represent(ed), their team, and the league with which the athlete is currently under contract. Write “none” if you currently do not represent any athletes.

Athlete Name: ____________________  Team Name: ____________________  Athlete Phone: _____________  League: _________

Athlete Name: ____________________  Team Name: ____________________  Athlete Phone: _____________  League: _________

Athlete Name: ____________________  Team Name: ____________________  Athlete Phone: _____________  League: _________

Athlete Name: ____________________  Team Name: ____________________  Athlete Phone: _____________  League: _________

Athlete Name: ____________________  Team Name: ____________________  Athlete Phone: _____________  League: _________

Please indicate which current Florida International University student-athlete(s) you plan to contact in the upcoming year.

Student-Athlete Name: ______________  Sport: ______________  Student-Athlete Name: ______________  Sport: ______________

Student-Athlete Name: ______________  Sport: ______________  Student-Athlete Name: ______________  Sport: ______________

Student-Athlete Name: ______________  Sport: ______________  Student-Athlete Name: ______________  Sport: ______________

Do you earn income from work performed in some capacity other than as an agent/advisor? (Circle one)  Yes               No

If yes, describe other occupation(s) or service(s) for which you are paid and the average amount of time spent doing agent/advisor related work per week.

Please list your last two places of employment, positions, and dates for which you were employed:

Business: ____________________  Position/Date: ______________  Address/City/State/Zip: ____________________

Business: ____________________  Position/Date: ______________  Address/City/State/Zip: ____________________

Please list three professional references below:

Name: ____________________  Business: ____________________  Position: ______________  Years Known: ______

Business Address/City/State/Zip: ____________________

Name: ____________________  Business: ____________________  Position: ______________  Years Known: ______

Business Address/City/State/Zip: ____________________

Name: ____________________  Business: ____________________  Position: ______________  Years Known: ______

Business Address/City/State/Zip: ____________________
V. COMPLIANCE HISTORY

Have you been involved in or investigated for allegedly participating in actions violating NCAA, Conference or University bylaws?  
Yes ☐  No ☐

If yes, please provide the name of complainant(s), the date of the alleged violation(s), and the result or status of the investigation, including action(s) taken, and the authority imposing the action(s) below:
________________________________________________________________________________________________________
_______________________________________________________________________________________________________
________________________________________________________________________________________________________

VI. EDUCATION

Undergraduate School Name: ________________________________
Degree(s) and Year Graduated: ________________________________
School Address/City/State/Zip: ________________________________

Graduate/Law School Name: ________________________________
Degree(s) and Year Graduated: ________________________________
School Address/City/State/Zip: ________________________________

Admitted to Bar (if applicable) - State: ____________ Date Admitted: ____________

VII. AGENT/ADVISOR AGREEMENT

I certify that the above information is accurate and complete to the best of my knowledge. Further, I certify that I will notify the Florida International University (FIU) Athletics Compliance Office (ACO) before the first contact with any student-athlete who has eligibility remaining in any sport and is enrolled at FIU or before the first contact with the student-athlete’s coach. I have reviewed the FIU, State of Florida, and NCAA rules and regulations that accompany this form and will engage in no activity violating the aforementioned rules and regulations or jeopardize the student-athlete’s eligibility. I also understand that failure to comply with the terms of this certification and the applicable FIU, State of Florida, and NCAA legislation may result in my being banned from coming onto an institution controlled area; that the institution may initiate legal proceedings against me; and civil and/or criminal penalties may be assessed to me in accordance with applicable Florida statutes.

Return completed forms to:

Signature: ________________________________
Date: ________________________________