

LSU COMPLIANCE
POST- OFFICIAL VISIT VERIFICATION FORM

Name of Prospective Student-Athlete

Sport

Visit Information: (to be completed by a coach or designee)

Date of Arrival

Time of Arrival

Date of Departure

Time of Departure

When did 48 hours begin?

Name(s) of Individual(s) that accompanied prospect on this visit and their relationship to the prospect

What were PSA travel arrangements? Commercial Air Personal / Family Car Other (owner of car) _____

Did the prospect incur any expenses (i.e. meals, lodging en route, mileage)? Yes No

If yes, please include prospect reimbursement form

Were entertainment funds provided to the student host(s)? Yes No

If yes, please include student host form

Was lodging provided to the PSA? Yes No
If yes, where? _____

Was additional lodging provided for family members? Yes No
If yes, for whom? _____

Were complimentary admissions provided for any athletics events? Yes No
If yes, how many? _____ To What Event(s)? _____

I certify that the above information is true and accurate, to the best of my knowledge. Further, in accordance with NCAA regulations, I recognize that this official visit constitutes my one allowable visit to LSU and counts toward my maximum of five official visits.

Signature of Prospective Student-Athlete

Date

Signature of Head Coach or Designee

Date