IPFW Student Athlete Opportunity Fund Application

20____- - 20___

The Student-Athlete Opportunity Fund (SAOF) is intended to provide direct benefits to student-athletes. As a guiding principle, the fund shall be used to assist student-athletes in meeting financial needs that arise in conjunction with enrollment in academic curriculum. Accordingly, receipt of SAOF monies shall not be included in determining the permissible amount of financial aid that a member institution may award to a studentathlete.

All student-athletes, including international students, are eligible to receive SAOF benefits, regardless of whether they are grant-in-aid recipients, have demonstrated need or have either exhausted eligibility or no longer participate due to medical reasons. Additionally, student-athletes receiving monies from the Special Assistance Fund (SAF) may also receive SAOF benefits.

Reason for Requesting the Funds

Signature of Compliance Coordinator

Date

Department or Sport Expenditure			
	Institutional Academic Programming Enhancements for Sport:		or Department
	Describe Enhancement		
	Amount Requested: (Purchase requisition	required)	
Student Athlete Expenditure			
	Student-Athlete Name:	Student ID Number:	Sport:
	Educational Expenses and Fees Choose option (A to J)	Health and Safety Expenses Choose option (K to P)	Personal or Family Expenses Choose option (Q to W)
A B C D E F G H I J K L M N O P Q R S T U V	Summer School Fifth or Sixth Year Aid Post Graduate Scholarship Postgraduate or Internship Fees International Student Fees and Taxes Graduate School Exam Fees Professional Program Testing Expendable Supplies Educational Supplies (e.g. laptop computers, cameras) Other Education Expenses OR Additional SASAF Funding for Academic Course Supplies (description required) Insurance Premiums for Student-Athletes Supplemental Insurance Medical Expenses for Student-Athletes (not covered by another insurance program for student-athletes not eligible for Special Assistance Fund) Dental/Vision Expenses for Student-Athletes (not covered by another insurance program for student-athletes not eligible for Special Assistance Fund) Medical Expenses for Student-Athletes (not covered by another insurance program for student-athletes not eligible for Special Assistance Fund) Medical Expenses for Student-Athletes (Poundament of Clothing Allowance Poundament of Clothing Allowance or Enhancement of Clothing Allowance from Special Assistance Fund Additional Student-Athlete Travel Home Emergency Travel for Student-Athletes, Spouses and/or Dependents Emergency Expenses for Student-Athletes, Spouses and/or Dependents Travel Expenses for Family members to be present as Student-Athlete is honored Travel Expenses for Team members being honored by Government body		
	Amount Requested: (Receipts required unless its summer school)		
Sig	gnature of Student-Athlete or Coach (if applicable)	Date	

Signature of Associate Athletic Director

Date