

COMPETITIVE SPORTS APPLICATION FORM

1.	Comp	liance Requirements
	Team Na	me:
	Sport:	
	Member	(s) Applying for Designation:
	Eac	h applying team must check that they adhere to the following requirements.
		National Governing Body:
		Does the organization require dues or licensing Yes No Please explain any additional membership information or requirements:
		Duplicate team or redundancies: Competitive Sports Program encourages a diversity of sports and
		competitive sports, not duplicate teams. Please explain how your team differs from other teams that
		may appear similar in name or structure (attach additional documents if necessary)
		Constitution: Please submit the most up-to-date team constitution.
		Budget: The team must have the ability to identify and articulate their potential to generate the revenue necessary for team operation.
		Please submit an example of an annual budget including all operational/special event costs and revenue generating plans.



Team Information and Background	ınd
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Please provide the following information for your team:
Team Vision Statement:
Mission Statement:
Team Goals: List team goals, specific to the current and/or upcoming school year as well as those applicable to the longevity of the team.
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3. Leadership and Member Information

Provide the following information for both officers and team members. Please remember that all officers must be matriculated students of the Utah Valley University. A minimum of $\underline{3}$ student officers is required for each team.

All competitive sports must have a minimum of $\underline{6}$ active members of their team. Officers:

Office	Name	Year in School
President		
Vice President		
Treasurer		
Safety Officer*		
Secretary*		

^{*} Not a required position to be filled but recommended



Teams may have additional officers if necessary to manage the team. Only the officers listed above are required for compliance.

Prospective or Current Members

Name & UVID	Utah Valley University Student? (Y/N)	Year in School
ooes your team have a coach or instructor(s): Yes No yes, please list their name(s), contact information, and qu	ualifications:	



4. Competition/Instructional Information

Team Competition and Travel:

regular season opponents	or other scheduled competitions	s. You may attach your seas	son schedule separately
Opponent:	Location:	Date:	
Does your team plan to ho	st events on campus? Yes	□ No	
regional or national tourna program office and addition	ogram encourages teams to host aments. These events require adv anal requirements may apply. Ple lities which will be required.	vanced planning with the C	Competitive Sports
Opponent:	Location (e.g., Field,	Room#): Date	:
Practice Facility Request: Indicate, in detail, which U	tah Valley University facilities w	ill be required for routine t	eam practices.
Location (e.g., Field, Room	#): Days/Time	2 S:	
Is your team represented a	as a Utah Valley University Athle	tics 🔲 Yes 🗖	No

All Teams must compete in intercollegiate competition at least once per year. Please indicate your teams's



5. Application Interview

To become a Competitive Sports team, all organizations must prepare a short presentation.

This formal presentation should demonstrate the following:

- The nature/background of the activity
- The entire team roster
- The 3 officers for the team and their respective positions
- The process of leadership transition beyond current members
- The marketing strategy for recruitment and retention
- The practice location(s) and any specific needs
- How the potential practice spaces will be utilized (a practice itinerary)
- The club's benefits of being designated a Competitive Sport team
- Data to support the team's financial stability
 - An operational budget from the previous year of the team's existence, showing how the team has/is going to generate revenue and how those funds will be managed/used
- Coaching credentials if applicable
- Documentation from your league and national governing body that states you have the ability to join
 or are an accepted member
- List of other geographically relevant colleges and Universities you will be competing against
 - Your competition schedule for the inaugural year

The information presented will be taken into account by the Competitive Sports full-time staff. Please be aware that the Competitive Sports office have final approval/denial of all groups. Reasons for the denial of the designation of a Competitive Sport may include, but is not limited to:

- 1. Proposed team does not meet the outlined qualifications stated on this form and within the Competitive Sports Handbook
- 2. Proposed team does not properly represent the Utah Valley University student body or is not consistent with the purpose and philosophy of Recreation & Wellness and/or Utah Valley University
- 3. Proposed team does not demonstrate compatibility with currently available resources (facility space, funding, and personnel)
- 4. Proposed team does not fit within the current competitive nature of the Competitive Sports designation or would better serve the student population in another circumstance
- 5. Proposed team does not sufficiently show a current ability to operate as a Competitive Sport

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***********	***************
Office use only	
Date/Time of Presentation: Reviewer(s): Name/Title	Location of Presentation:



6. Agreement

The Competitive Sports Office will place any newly recognized team on probationary status for one academic year with a review process following. At the end of the academic year, upon successfully completing the review process, the team may receive full recognition. Successful completion of the review will require the team to have followed all policies and procedures, submitted all required paperwork as scheduled and not been the subject of any disciplinary action.

*By signing below, signatories certify they have completed the form and have done so accurately to the best of their knowledge, and also agree to all policies and procedures as outlined by the Competitive Sports Handbook.

President:		Date:	
Email:		Phone:	
Signature:			-
Vice President:		Date:	
Email:		Phone:	
Signature:			-
Treasurer:		Date:	
Email:		Phone:	
Signature:			_
If you have any further que Competitive Sports staff	•	Sports application process, please contact the	

Office use only			
Date Received: Reviewer(s): Name/Title	Date Reviewed:	Notification Date:	
Application Status: Ap	proved Denied		