

44th National Collegiate Taekwondo Championships April 20-21, 2019



FORM A: CERTIFICATION OF COLLEGIATE STATUS

THIS FORM MUST BE CERTIFIED WITH AN OFFICIAL SEAL AND SIGNATURE BY YOUR COLLEGE OR UNIVERSITY **ON OR AFTER February 10, 2019.**

COMPETITOR NAME:	DOB:
PHONE NUMBER:	EMAIL:
COMPETITOR DIVISIONS (poomsae and/or	r sparring, include belt color):
COLLEGE / UNIVERSITY:	
YEAR IN COLLEGE / UNIVERSITY: freshr	man / sophomore / junior / senior / graduated / graduate student
MAJOR:	Student ID #:
I,, at registered student pursuing a degree with the c	uthorize NCTA officials to confirm my status as an officially college/university official listed below
	(your signature)(date)
The official school seal/stamp and signature (back one)	below) verifies that the above-named competitor is EITHER (please
currently registered as a half-time or greated university (half-time status is usually defined as	er student for SPRING Term 2019 at the above-named college or as 6 or more university equivalent credits),
OR	
graduated from the above-named college o	or university in 2018 or 2019.
Signature and Title of college/university offici	ial
Phone number of college/university official _	
Date (must be on or after February 10, 2019)	
School Seal/Stamp:	Postmark by April 5, 2019. Mail to: NCTA 2019 17 Congress Ave Sioux City, IA 51104-4053

Please DO NOT use signature required.