



The completion of this form ***DOES NOT SATISFY THE ARKANSAS STATUTE*** requiring Athlete Agents to file with the State of Arkansas Secretary of State. (See Arkansas Code § 17-16-101 – § 17-16-120). Proof of filing with the State of Arkansas Secretary of State must be furnished to the ASU Compliance Office by those individuals wishing to represent current ASU Student-Athletes in ***FUTURE*** professional athletic careers.

Please return this questionnaire to the Arkansas State University Office of Athletics Compliance:

Mail to: P.O. Box 1000, State University, Arkansas 72467, or

Fax to: (870) 972-3959, or

Email to: athleticscompliance@astate.edu

PHOTO

*Please attach a recent photograph.

BACKGROUND

Name: _____

Firm: _____

Address: _____

City/State/Zip: _____

Daytime Phone: _____

Evening Phone: _____

Fax: _____

E-mail: _____

STATEMENT OF UNDERSTANDING

The following information is provided as a service to aid _____
Student-Athlete's Name

and/or ASU to better understand the type and kinds of services and expertise offered by the respondent in preparation for a future professional sports contract. It is acknowledged by all parties to this communication that the responses are intended to assist any student-athlete in learning more about the particular firm and its agents/representatives. Part of this process is accomplished by reference to the information provided below – in other instances, by personal interview or meeting. Cognizant of the need to provide accurate and reliable information, it is understood by those reviewing this material that the answers provided can be relied upon for their veracity and accuracy. If additional information is required to respond to a specific question, please attach whatever documentation is appropriate. In submitting this form, I voluntarily agree to comply with and be bound by any applicable State law. I further understand that by making any false or misleading statement of any nature in answering a question on this form, that the firm or individual may be identified to all institutional representatives (including student-athletes, parents/legal guardians) and any other collegiate institution that may deem such lack of disclosure appropriate in counseling student-athletes regarding future professional sport opportunities.

Agent's Signature

INFORMATIONAL QUESTION/RESPONSES

All questions must be answered completely

1. List your educational background. Included dates attended and degrees conferred.

2. List your employment history for the last ten (10) years.

3. How many years experience do you have representing student-athletes in securing future professional sports contracts?

4. How many clients have you represented during the period of time indicated in question #3?

5. Of the clients that you have represented, how many are still using your professional services?

6. Provide the names/telephone numbers of five of your current clients to be contacted by either ASU's sports counseling panel or a student-athlete requesting this information?

7. Provide a list of names/telephone numbers of any clients who may have previously used your professional services, but are no longer associated with you or your firm?

8. Please identify your areas of expertise in reference to professional sports/agent representation.

9. What specific services are available to your clients?

10. Do you offer a separate contract for each of these services?

11. List any occupational or professional licenses or other similar credentials you have obtained other than college or graduate school degrees, including the dates they were obtained:

12. Have you ever been disbarred, suspended, reprimanded, censured, or otherwise disciplined or disqualified as an attorney, as a member of any other profession, or as a holder of any public office? (YES / NO)

If YES, please describe each action, the dates of the occurrence, and the names and addresses of the authority imposing the action in question:

13. Are any charges or complaints currently pending against you regarding your conduct as an attorney, as a member of any profession, or as a holder of public office? (YES / NO)

If YES, please describe including the authority considering the action:

14. Have you ever been convicted of, or plead guilty to, a criminal charge, or other than minor traffic violations (\$100 fine or less)? (YES / NO)

If YES, indicate the nature of the offense, date of conviction, criminal authority involved, and punishment assessed:

15. Have you ever been the defendant in any civil proceeding, including bankruptcy proceedings, in which allegations of fraud, misrepresentation, embezzlement, misappropriation of funds, conversion, breach of fiduciary duty, forgery, or legal malpractice were made against you? (YES/ NO)

If YES, please describe fully and indicate the result of the civil proceeding(s) in question:

16. Have you ever been adjudicated insane or legally incompetent by any court?

17. Have you ever been suspended or expelled from any college, university or law school? (YES/ NO)

If YES, please describe the circumstance:

18. Please identify which of the following services you provide:

Contract Negotiation _____
Grievance Arbitration _____
Financial Planning _____
Appearance/Endorsements _____
Estate Planning _____
Tax Planning _____

Investment Counseling _____
Other Services (explain) _____

19. Are your customary fees for the above based on a percentage of the client's salary you negotiate, total income of the client, an hourly fee or some other arrangement? (Please explain)

20. Please describe your fee structure?

21. How and when do you expect to be paid for your services under your contract?

22. What is the duration of your contract?

23. Under what conditions may a client terminate a contract?

24. Do you have an agreement, understanding or relationship of any kind with any individual, firm or organization pursuant to which such an individual, firm or organization solicits or encourages clients to use your services (e.g., runners, etc...)? (YES / NO)

Do you provide any compensation or other consideration to such an individuals, firms or organizations? (YES / NO)

Please list all such individuals and/or organizations (both compensated and uncompensated) and explain the nature of the relationship between you and the individual and/or organization as well as how such individuals and/or organizations are compensated, if applicable. **(Failure to list all such individuals or organizations may result in dissociation).**

25. What happens if your client is waived from a team?

26. Do you limit the number of clients you will represent (and if so, how many)?

ACKNOWLEDGEMENT

I, _____ being first duly sworn, say that I have read the foregoing questions and have personally answered the same fully and honestly and the answers to said questions are true and accurate to my knowledge.

Further affiant sayeth not.

Agent's Signature

Sworn before me in my presence this _____ day of _____, 20____.

Notary Public