

NOVA Volleyball Team Member Verification Form

Students who play volleyball on one of NOVA's intercollegiate or club teams may request that advanced standing credit be granted for the PED course listed below. To document your participation and knowledge, please fill out the top part of this form and give it to your coach for verification, along with page 1 of the 125-49 Request for Evaluation of Transcript form:

Student's Name: _____ Student's ID #: _____ Date: _____
(printed)

Team: _____ Semester _____ and Year _____ of team participation.

Coach's name: _____ Coach's NOVA email: _____ @nvcc.edu

Coach's Instructions: Aside from the history of volleyball, all elements included in A – F should be developed, practiced and applied during practice sessions and also applied in competitive game play as well.

To verify this, please complete this form and verify that the student has practiced these skills and has **actively** participated in one season within the last two years, taking part in a minimum of 20 hours of practices and games.

PED 154 Volleyball (1 cr.)

Introduces skills, techniques, strategies, rules, and scoring. Introduces the proper techniques, skills, strategy, rules, and scoring needed to play and enjoy the game of volleyball.

Upon completion of this course the student will be able to:

- A. Understand the history of volleyball.
- B. Understand and demonstrate the basic skills of serving, passing, blocking, setting, and spiking.
- C. Demonstrate a knowledge of the rules, terminology and scoring in volleyball.
- D. Understand game strategy and team play.
- E. Development of strategy in various playing positions
- F. Participate in tournament play

Coach's verification:

As coach of the above stated team, I verify that the above stated student has **actively** participated in a minimum of 20 hours of all practices and games during the above stated season. Additionally, I verify that during practices and games the above stated student had ample opportunity to learn and develop the skills listed above.

Coach's signature: _____ Date: _____

College-Wide Director for Student Activities' signature: _____ Date: _____

Coach:

Please forward the signed form, along with the student's 125-49 Request for Evaluation of Transcript, to the College-Wide Director for Student Activities (AL Campus). Once signed by the Director, the forms should be forwarded to the Campus Registrar.

Campus Registrar:

Date received: _____ Date Scanned: _____ Initials: _____ Date linked to CRO: _____ Initials: _____

Confirmation will be sent to the student's NOVA email account within 4-6 weeks.