

FORMER SCHOOL—please initial all that apply and sign below:

YES	NO		YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	STUDENT WAS ACADEMICALLY ELIGIBLE AT TIME OF TRANSFER	<input type="checkbox"/>	<input type="checkbox"/>	STUDENT MET ALL OTHER CIF ELIGIBILITY RULES AT TIME OF TRANSFER
<input type="checkbox"/>	<input type="checkbox"/>	STUDENT IS TRANSFERRING WITH NO DISCIPLINARY ACTION TAKEN OR PENDING			

Please Print Former School Principal's Name: _____

Former School Principal's Signature _____ Date: _____

510 PRE-ENROLLMENT CONTACT AFFIDAVIT (By-law 510)—READ CAREFULLY BEFORE SIGNING!!!!

PARENT'S AND STUDENT STATEMENT'S #1, AND/OR 2, OR 3

1. SIGN IF TRUE: By signing this affidavit below, I certify that no person who is associated* with the athletic department of the enrolling (new) school (School "B"), or is part of the booster club of School "B" or who was acting on their behalf has had ANY communication, directly or indirectly, through intermediaries or otherwise with this transfer student, student's parents, legal guardian or caregiver, or anyone acting on behalf of this student, prior to the completion of the enrollment process at School "B". (Sign below only if this is a true statement. If not sign statement #3 and attach an explanation) (*Associated is defined in CIF Bylaw 510)

Parent's Signature **Date** **Student's Signature** **Date**

2. SIGN IF TRUE: By signing this affidavit below, I certify that the student has not participated during the previous 24 months on any non-school athletic team* (i.e., AAU, American Legion, club team, etc.) that is associated* with or coached by anyone associated* with the enrolling (new) school (School "B"). (*See Bylaw 510 for definition of a non-school athletic team.) (Sign below only if this is a true statement. If not, sign statement #3 and attach an explanation) (*Associated is defined in CIF Bylaw 510)

Parent's Signature **Date** **Student's Signature** **Date**

OR

3. SIGN IF EITHER #1 OR #2 ABOVE ARE NOT TRUE: I am unable to certify that one or both of the above statements are true. Therefore, as required, I am submitting a complete written disclosure of the specifics. (Attach the explanation to this form.)

Parent's Signature **Date** **Student's Signature** **Date**

FORMER AND CURRENT/NEW SCHOOL STATEMENTS

My signature below attests that to the best of my knowledge I have no credible** evidence of any person who is associated* with the athletic department of the new school (School "B") or who is part of the booster club of the new school (School "B") or who is acting on their behalf, having communication, directly or indirectly, through intermediaries or otherwise with the transfer student, student's parents, legal guardian or caregiver, or anyone acting on behalf of the student, prior to the completion of the enrollment process. Furthermore, I am not aware of this student participating during the previous 24 months on any non-school athletic team* that is associated* with the enrolling (new) school (School "B"). (*See Bylaw 510 for definition of a non-school athletic team and the term "associated")

<u>Former School Signatures</u>			<u>Current/New School Signatures</u>		
Signature of Athletic Director of former school	<u>Date</u>		Signature of Athletic Director of new school	<u>Date</u>	
Signature of Head Coach of former school (fall)	<u>Sport</u> <u>Date</u>		Signature of Head Coach of new school (fall)	<u>sport</u> <u>Date</u>	
Signature of Head Coach of former school (winter)	<u>Sport</u> <u>Date</u>		Signature of Head Coach of new school (winter)	<u>Sport</u> <u>Date</u>	
Signature of Head Coach of former school (spring)	<u>Sport</u> <u>Date</u>		Signature of Head Coach of new school (spring)	<u>Sport</u> <u>Date</u>	
Signature of Principal of former school	<u>Date</u>		Signature of Principal of new school	<u>Date</u>	

OR I am unable to certify that one or both of the above statements are true. Therefore, as required, I am submitting a complete written disclosure of the specifics. (Attach the explanation to this form-CHECK BELOW AND SIGN.)

<input style="width: 50px; height: 20px;" type="checkbox"/> _____ Signature of FORMER Principal unable to certify statement above <u>Date</u>		<input style="width: 50px; height: 20px;" type="checkbox"/> _____ Signature of NEW Principal unable to certify statement above. <u>Date</u>
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