



DO NOT FAX

APPLICATION FOR RESIDENTIAL ELIGIBILITY

For more information see www.cifstate.org



FORM 207.B/510

Student transferring from a school within the U.S. from School A-B-back to A and who DID NOT PLAY ANY SPORTS while at B and who is a not a disciplinary transfer from either school.

Please complete all fields-incomplete applications will be denied

Circle Grade: 9 10 11 12
(Grade Level @ time of enrollment in new school)

1. STUDENT'S NAME _____ DATE OF BIRTH _____

2. CURRENT ADDRESS _____ PHONE (____) _____
(city) (zip) (area code)

3. FORMER ADDRESS _____
(city)

4. TRANSFER FROM: _____ High School BACK TO: _____ HS (A)
(previous school (B) name) (former and current school (A) name)

5. ENROLLED IN PREVIOUS SCHOOL B FROM ____/____/20____ TO ____/____/20____ Returned to School A on: ____/____/20____
(high school enrollment only) (month/day/year) (month/day/year) (month/day/year)

6. LIST IN ORDER ANY **OTHER** HIGH SCHOOLS ATTENDED: **Previous School(s)** **Enrollment Dates**
and list IN ORDER dates of attendance under high school name
1. _____ Attended From: _____ To: _____
2. _____ Attended From: _____ To: _____
3. _____ Attended From: _____ To: _____
(month/day/year)

7. APPLICATION MADE UNDER THE FOLLOWING:

APPLICATION FOR TRANSFER HARDSHIP VARSITY ELIGIBILITY BYLAW 207.B. (4)— **(A-B-A)-NO SPORTS @ B -attach documentation & description of reason for transfer to B and back to A!**

This student did NOT participate in any sports while at School B

8. Place an CHECK MARK in front of each sport in which this student competed in high school A in any contest AT ANY LEVEL (Freshman or JV or Fr/Soph or Varsity) during the 12 months before this transfer BACK TO SCHOOL A:

ANY contest of ANY kind (scrimmages, practice games, pre-season games, league games, playoff games etc in which this student played at school A in the 12 months BEFORE the date in #5 above "Returned to School A on:

<input type="checkbox"/> BADMINTON	<input type="checkbox"/> BASEBALL	<input type="checkbox"/> BASKETBALL	<input type="checkbox"/> CROSS COUNTRY	<input type="checkbox"/> FIELD HOCKEY	<input type="checkbox"/> FOOTBALL
<input type="checkbox"/> GOLF	<input type="checkbox"/> GYMNASTICS	<input type="checkbox"/> LACROSSE	<input type="checkbox"/> SKIING	<input type="checkbox"/> SOCCER	<input type="checkbox"/> SOFTBALL
<input type="checkbox"/> SWIMMING	<input type="checkbox"/> TENNIS	<input type="checkbox"/> TRACK	<input type="checkbox"/> VOLLEYBALL	<input type="checkbox"/> WATER POLO	<input type="checkbox"/> WRESTLING

I DID NOT PLAY SPORTS AT ANY LEVEL @ SCHOOL "A" IN THE 12 MONTHS BEFORE I RETURNED TO SCHOOL A

9. SCHOOL A's ATHLETIC DIRECTOR'S SIGNATURE CONFIRMING SPORTS PARTICIPATION AS INDICATED ABOVE:

School "A" AD Signature Required!

10. FORMER SCHOOL(SCHOOL B)-please initial all that apply and sign below (see also page 2):

YES NO	Student is transferring with NO disciplinary action pending or which has been taken at the time of transfer from our school.	YES NO	Student met all other CIF and/or school Eligibility Rules at the time of transfer to the best of my knowledge.
<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <input type="checkbox"/>	Student was ACADEMICALLY eligible at our school at the time of transfer	STUDENT'S GPA IN THE LAST GRADING PERIOD AT THE PREVIOUS SCHOOL _____ . _____ GPA	
Former School (School B) Principal's Signature _____		Date: _____	
Print Principal's Name _____			

11. CERTIFICATION OF APPLICATION: By filing this application for interscholastic athletic eligibility, I specifically authorize any and all of this student's former and current/new high schools to release all records regarding this student and to disclose to the CIF Section ("CIF") representative any information or documentation needed or requested by the "CIF" in making this eligibility determination. I authorize the "CIF" to use that information in making its decision. I understand that the "CIF" may be unable to grant athletic eligibility absent the disclosure of relevant information or documentation from this student's former or current/new high schools. I am authorized to make this request. I affirm that all of the above statements are true to the best of my knowledge. I further affirm that I understand that if subsequent to the approval of this application, it is discovered that this approval was granted under false, erroneous, inaccurate or incomplete information, severe penalties affecting the future eligibility of this student-athlete may result. (CIF By-law 200)

SIGNATURE OF PARENT/GUARDIAN

DATE

SIGNATURE OF STUDENT

DATE

PARENT AND STUDENT STATEMENTS **Read #1, #2 and #3 carefully before signing.**

1 SIGN IF TRUE: By signing this affidavit below, I certify that no person who is associated* with the athletic department of the FORMER AND CURRENT SCHOOL (School "A"), or is part of the booster club of School "A" 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, DURING THEIR ENROLLMENT at Previous School "B". (*Associated is defined in CIF Bylaw 510)

Parent's Signature	Date	Student's Signature	Date
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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 (former and current school (School "A")). (*See Bylaw 510 for definition of a non-school athletic team.) (See 510 for definition of "associated")

Parent's Signature	Date	Student's Signature	Date
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Sign #3 below if you could not sign that BOTH #1 and #2 above were true.

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
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510-FORMER (School B) AND CURRENT(NEW-School A) SCHOOL STATEMENTS

1. 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 former & current (School "A") or who is part of the booster club of the new school (School "A") 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, during the time they were enrolled in School "B" & prior to their return to School "A".
2. AND 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 (former & current) school (School "A"). (*See Bylaw 510 for definition of a non-school athletic team & the term "associated")

IF THESE STATEMENTS ARE BOTH TRUE, AD, Principals and Coach(es), SIGN IN BOX 1;

IF NOT, then Principal only should sign Box 2 & attach statement(s) describing what makes 1 or 2 untrue.

<p style="text-align: center;"><u>FORMER School (School B) Signatures</u></p> <p style="font-size: 2em; opacity: 0.5; transform: rotate(-15deg); position: absolute; top: 50px; left: 50px;">Only Principal's signature is required since the student did not play sports at School B</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;"><u>Sport</u></td> <td style="width:33%;">Signature of Head Coach</td> <td style="width:33%; text-align: center;"><u>Date</u></td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td><u>Sport</u></td> <td>Signature of Head Coach</td> <td style="text-align: center;"><u>Date</u></td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td><u>Sport</u></td> <td>Signature of Head Coach</td> <td style="text-align: center;"><u>Date</u></td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td colspan="2">Signature of Principal of former school</td> <td style="text-align: center;"><u>Date</u></td> </tr> <tr> <td colspan="2">_____</td> <td>_____</td> </tr> </table>	<u>Sport</u>	Signature of Head Coach	<u>Date</u>	_____	_____	_____	<u>Sport</u>	Signature of Head Coach	<u>Date</u>	_____	_____	_____	<u>Sport</u>	Signature of Head Coach	<u>Date</u>	_____	_____	_____	Signature of Principal of former school		<u>Date</u>	_____		_____	<p style="text-align: center;">BOX 1 <u>CURRENT/NEW School (School A) Signatures</u> AD, Principal & any coach for which this student wishes to play should sign</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Signature of Athletic Director of new school</td> <td style="width:30%; text-align: center;"><u>Date</u></td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td><u>sport</u></td> <td>Signature of Head Coach (fall)</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td><u>Sport</u></td> <td>Signature of Head Coach (winter)</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td><u>Sport</u></td> <td>Signature of Head Coach (spring)</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td colspan="2">Signature of Principal of new school</td> </tr> <tr> <td colspan="2">_____</td> </tr> </table>	Signature of Athletic Director of new school	<u>Date</u>	_____	_____	<u>sport</u>	Signature of Head Coach (fall)	_____	_____	<u>Sport</u>	Signature of Head Coach (winter)	_____	_____	<u>Sport</u>	Signature of Head Coach (spring)	_____	_____	Signature of Principal of new school		_____	
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BOX 2 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: 100%; height: 20px;" type="text"/> Signature of FORMER Principal unable to certify statements above are both true. <u>Date</u>	<input style="width: 100%; height: 20px;" type="text"/> Signature of CURRENT Principal unable to certify statements above are both true. <u>Date</u>
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**NEW SCHOOL ONLY should mail completed, original to CCS, 6830 Via Del Oro, Suite 103, San Jose CA 95119
 OR scan and e-mail application and all documents to Michael Mancuso**

NOTE: SUBMIT THE ORIGINAL DOCUMENT. ALLOW 20 BUSINESS DAYS FOR INVESTIGATION AND REVIEW. AT THE TIME OF FILING THIS DOCUMENT, SUBMIT ALL KNOWN FACTS AND/OR DOCUMENTS. ADDITIONAL FACTS SUBMITTED LATE MAY NOT BE CONSIDERED BY THE COMMISSIONER.